

Group Health Plans Report
Abstract of 2016 Form 5500 Annual Reports
Reflecting Statistical Year Filings
Data Extracted on 5/4/2018



EMPLOYEE BENEFITS SECURITY ADMINISTRATION
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HIGHLIGHTS FROM THE 2016 FORM 5500 GROUP HEALTH PLANS REPORT

The universe of group health insurance plans filing a Form 5500 is diverse and complicated. Varying benefit structures, funding arrangements, and relationships to insurance are all major components of the complexity. For purposes of generating this report, EBSA classified private sector employer-sponsored group health employee benefit plans as either self-insured, fully insured, or having both self-insured and fully insured characteristics (mixed-insured). Appendix A1 at the end of this report provides more information on the classification methodology. Additionally, the methodology for selecting data underlying this report is based upon Form 5500 plan year end dates, meaning all employer-sponsored group health employee benefit plan filings with plan year ending dates in 2016 are included.

Findings from private sector employer-sponsored group health plans filing Form 5500 series welfare reports for plan year 2016 are summarized below.

This document is Appendix A to the Report to Congress: Annual Report on Self-Insured Group Health Plans for 2019.

Plan Type Characteristics

- In 2016, almost 24,000, or 42 percent, of the more than 56,000 private sector employer-sponsored group health plans that filed a Form 5500 can be categorized as self-insured. Of the remaining 33,000 group health plans, approximately 4,000, or 7 percent of all plans, can be categorized as mixed-insured, and approximately 28,000,

or 51 percent, can be categorized as fully insured. (See Table A1.)

- Of the approximately 56,000 group health plans mentioned above, about 15 percent offered health (other than vision or dental)¹ benefits. Conversely, 85 percent offered other welfare benefits (such as dental, vision, life, disability, etc.) in addition to health benefits. Of these approximately 48,000 plans, 39 percent can be described as having self-insured health benefits while 8 percent can be categorized as mixed-insured. The remaining 53 percent of these plans can be described as having fully insured health benefits. (See Table A1.)
- Eighty-four percent of the self-insured plans that indicate only providing health benefits do not report any type of insurance on Schedule A. Only 17 percent of self-insured plans providing health and other benefits do the same. This indicates that even for self-insured plans, other benefits are more likely to be insured.²
- Fifty-two percent of all private sector single employer group health plans that filed a 2016 Form 5500 provided fully insured health benefits to their employees. Multiemployer group health plans were much less likely to provide fully insured health benefits; only 9 percent of those plans did so in 2016. (See Table A2.)
- Approximately 23,000 of the group health plans categorized as self-insured are single employer plans; the

¹ For the remainder of this report, health benefits exclude vision and dental benefits consistent with the 2016 Instructions for Form 5500 Annual Return/Report of Employee Benefit Plan at <https://www.dol.gov/sites/default/files/ebsa/employers-and-advisers/plan-administration-and-compliance/reporting-and-filing/form-5500/2016-instructions.pdf>.

² The statistics in this note were tabulated using the 2016 Group Health Plans Research File, which contains the data underlying the tables presented in this Report. For more information and to access the data, please visit <https://www.dol.gov/agencies/ebsa/researchers/data/group-health-plan-data>.

remaining 1,000 are multiemployer plans. Of the 4,000 group health plans categorized as mixed-insured, the majority are single employer with fewer than 1,000 being multiemployer plans. Nearly all of the 28,000 group health plans categorized as fully insured are single employer with fewer than 200 being multiemployer plans. (See Table A2.)

- Of the 56,000 group health plans that filed a 2016 Form 5500, approximately 18,000 indicated a funding arrangement of insurance only, more than 2,000 indicated a funding arrangement of a trust only, and 6,000 indicated a funding arrangement of general assets of the sponsor only. The remaining 29,000 group health plan filers indicated some combination of funding arrangements or did not report any arrangement. The most common combination of funding arrangements was general assets of the sponsor and insurance, with 25,000 plans indicating this type of arrangement. (See Table A7.)

Number of Participants

- Forty-six percent, or 34 million, of the approximately 75 million participants in group health plans filing a 2016 Form 5500 were covered under self-insured group health plans. (See Table A2.)
- More than three-quarters of the group health plans categorized as self-insured covered 100 or more participants and did not operate a trust. Approximately 70 percent of all mixed-insured group health plans and nearly all of the fully insured group health plans covered 100 or more participants and did not operate a trust.³ (See Table A2.)

³ However, this is a data restriction that results from the filing exemption provided to welfare benefit plans (other than plans required to file the Form M-1) covering fewer

- The mean number of participants in group health plans was 1,300 in 2016. The means for self-insured, mixed-insured, and fully insured were 1,500, 6,700 and 500, respectively. The medians for self-insured, mixed-insured, and fully insured were 300, 1,400 and 200, respectively. (See Table A9.)

Assets and Liabilities

- In total, group health plans that filed a Form 5500 held about \$225 billion in assets as of the end of 2016. Self-insured group health plans held approximately \$82 billion, mixed-insured group health plans held \$141 billion, and fully insured group health plans held about \$2 billion. (See Table A2.)
- Despite comprising only 7 percent of plans, mixed-insured plans covered 37 percent of end-of-year participants and held nearly 63 percent of all group health plan assets. Therefore, a relatively small number of plans drive many of the aggregate statistics presented in the remainder of this report. (See Table A2.) For instance, of the 20 largest plans by asset size, 16 were mixed-insured and held approximately \$89 billion, or nearly two-fifths of total health plan assets.⁴
- Self-insured group health plans with trusts and covering 100 or more participants held approximately 17 percent of their assets in cash and U.S. Government securities, 23 percent in direct filing entities, 23 percent in mutual fund

than 100 participants as of the beginning of the plan year which are unfunded, fully insured, or a combination of insured and unfunded, as specified in 29 CFR 2520.104-20. For more information on filing requirements and exemptions, see Appendix A1.

⁴ The statistics in this note were tabulated using the 2016 Group Health Plans Research File which contains the data underlying the tables presented in this Report. For more information and to access the data, please visit <https://www.dol.gov/agencies/ebsa/researchers/data/group-health-plan-data>.

companies (registered investment companies), 9 percent in debt instruments, and 10 percent in stock. Mixed-insured group health plans with trusts and covering 100 or more participants held approximately 17 percent of their assets in cash and U.S. Government securities, 14 percent in direct filing entities, 11 percent in mutual fund companies, 11 percent in debt instruments, and 23 percent in stock. Fully insured group health plans with trusts and covering 100 or more participants held approximately 28 percent of their assets in cash and U.S. Government securities, 4 percent in direct filing entities, 38 percent in mutual fund companies, 8 percent in debt instruments, and 1 percent in stock. (See Table A6.)

- Form 5500 group health plan filers reported \$26 billion in liabilities as of the end of 2016: approximately \$10 billion was reported by self-insured group health plans, \$15 billion by mixed-insured group health plans, and \$200 million by fully insured group health plans. (See Table A2.)
- The \$10 billion in liabilities reported by self-insured plans represented 18 percent of total benefit payments made by self-insured plans and roughly 17 percent of total contributions to self-insured plans. By definition, plans without trusts report no assets or liabilities. The liabilities that are reported in no way represent all of the future health and welfare benefit obligations of the group health plans presented in this report. (See Tables A2, A4, and A5.)

Annual Cash Flows

- Overall, group health plans with trusts reported receiving approximately \$149 billion in contributions in 2016, with nearly \$122 billion contributed by the employers and approximately \$26 billion contributed by the plan

participants. Roughly \$1 billion was contributed in total to plans with fewer than 100 participants. (See Table A4.)

- In 2016, group health plans filing a Form 5500 that used trusts posted investment income gains of approximately \$10 billion. About \$3 billion was gained by self-insured group health plans, about \$7 billion gained by mixed-insured group health plans, and less than \$100 million gained by fully insured group health plans. (See Table A4.)
- Self-insured group health plans that filed a 2016 Form 5500, covered 100 or more participants, and used trusts made benefit payments of \$44 billion directly to participants and \$7 billion to insurance carriers for the provision of other insured benefits. Mixed-insured group health plans of this type made benefit payments to participants totaling about \$60 billion and made payments to insurance carriers of \$24 billion. Fully insured group health plans paid about \$3 billion to insurance carriers for provision of benefits. These payments were funded through a trust. (See Table A5.)
- In total, group health plans filing a 2016 Form 5500 reported about \$9 billion in administrative expenses.⁵ Self-insured group health plans reported approximately \$4 billion, mixed-insured group health plans reported approximately \$5 billion, and fully insured group health plans reported approximately \$100 million. (See Table A5.)

⁵ When applicable, Form 5500 filers report administrative expenses on either Schedule H – Financial Information, Part II – Income and Expense Statement, line number 2(i) – Administrative expenses or on Schedule I – Financial Information, Part I – Income, Expenses, and Transfers for this Plan Year, line number 2(h). Form 5500-SF filers report administrative expenses in Part III – Financial Information, line number 8(f).

Table A1. Number of Group Health Plans, Total Participants, Active Participants, Assets, Contributions, and Benefits by type of benefit and type of insurance, 2016

All Plans

Type of Benefit	Number of Plans	Total Participants, End of Year (thousands) ¹	Active Participants, End of Year (thousands) ²	Total Assets (millions)	Total Contributions (millions) ³	Total Benefits (millions) ⁴
Total	56,211	75,164	66,987	\$225,487	\$148,962	\$144,980
Health Benefits Only	8,312	5,862	5,071	13,872	6,524	6,544
Health and Other Benefits	47,899	69,302	61,916	211,615	142,438	138,436
Health and Dental	1,825	1,870	1,592	5,847	4,274	4,375
Health and Vision	684	556	423	2,157	1,075	1,223
Health and Non-Health ⁵	2,727	8,916	7,399	14,981	6,539	6,758
Health, Dental, and Vision	2,750	4,170	3,712	9,837	10,872	10,419
Health, Dental, and Non-Health ⁵	7,234	5,762	4,779	22,410	11,844	10,978
Health, Vision, and Non-Health ⁵	725	932	739	4,797	2,987	2,968
Health, Dental, Vision, and Non-Health ⁵	31,954	47,096	43,273	151,587	104,848	101,715

Self-Insured

Type of Benefit	Number of Plans	Total Participants, End of Year (thousands) ¹	Active Participants, End of Year (thousands) ²	Total Assets (millions)	Total Contributions (millions) ³	Total Benefits (millions) ⁴
Total	23,704	34,493	30,836	\$82,280	\$59,093	\$55,973
Health Benefits Only	5,125	4,054	3,519	8,316	3,681	3,605
Health and Other Benefits	18,579	30,438	27,317	73,964	55,411	52,368
Health and Dental	923	927	796	2,052	1,361	1,488
Health and Vision	266	333	257	1,002	639	640
Health and Non-Health ⁵	1,428	7,337	5,994	8,736	4,800	4,884
Health, Dental, and Vision	1,453	2,181	1,928	7,273	5,338	5,174
Health, Dental, and Non-Health ⁵	2,685	2,463	2,179	6,087	5,294	5,077
Health, Vision, and Non-Health ⁵	300	409	347	1,501	1,296	1,259
Health, Dental, Vision, and Non-Health ⁵	11,524	16,790	15,815	47,314	36,684	33,846

(continued...)

Table A1. Number of Group Health Plans, Total Participants, Active Participants, Assets, Contributions, and Benefits by type of benefit and type of insurance, 2016

Mixed-Insured

Type of Benefit	Number of Plans	Total Participants, End of Year (thousands) ¹	Active Participants, End of Year (thousands) ²	Total Assets (millions)	Total Contributions (millions) ³	Total Benefits (millions) ⁴
Total	4,098	27,505	23,445	\$141,084	\$86,681	\$85,924
Health Benefits Only	182	587	417	5,398	2,368	2,439
Health and Other Benefits	3,916	26,918	23,029	135,686	84,313	83,486
Health and Dental	100	674	540	3,776	2,876	2,852
Health and Vision	23	108	58	1,154	434	581
Health and Non-Health ⁵	168	409	271	5,327	1,632	1,753
Health, Dental, and Vision	158	1,569	1,396	2,472	5,376	5,088
Health, Dental, and Non-Health ⁵	366	1,839	1,169	16,259	6,320	5,679
Health, Vision, and Non-Health ⁵	68	351	242	3,288	1,680	1,699
Health, Dental, Vision, and Non-Health ⁵	3,033	21,966	19,352	103,411	65,996	65,833

Fully Insured

Type of Benefit	Number of Plans	Total Participants, End of Year (thousands) ¹	Active Participants, End of Year (thousands) ²	Total Assets (millions)	Total Contributions (millions) ³	Total Benefits (millions) ⁴
Total	28,409	13,167	12,706	\$2,123	\$3,189	\$3,083
Health Benefits Only	3,005	1,221	1,135	157	475	500
Health and Other Benefits	25,404	11,946	11,571	1,966	2,713	2,582
Health and Dental	802	269	256	20	37	35
Health and Vision	395	114	108	1	2	2
Health and Non-Health ⁵	1,131	1,170	1,133	919	108	121
Health, Dental, and Vision	1,139	420	388	92	159	157
Health, Dental, and Non-Health ⁵	4,183	1,461	1,431	63	230	222
Health, Vision, and Non-Health ⁵	357	172	149	9	11	10
Health, Dental, Vision, and Non-Health ⁵	17,397	8,340	8,105	862	2,168	2,035

NOTES: Total participants, active participants, and total assets are tabulated as of the end of the plan year.

Totals may not equal the sum of the components due to rounding.

¹ For the purposes of this report, includes active, retired, and separated participants either receiving benefits or entitled to future benefits.

² For Form 5500-SF filers, all reported participants are assumed to be active.

³ For the purposes of this report, includes both employer and employee contributions.

⁴ Amounts shown include both benefits paid directly to participants and beneficiaries from trust funds and premium payments made by plans to insurance carriers. Amounts exclude benefits paid directly by insurance carriers. Plans classified as fully insured do not report benefit payments made directly to participants. Reported benefit payments for these plans are paid to insurance companies for the provision of benefits. According to the plan funding classification algorithm outlined in Appendix A1, plans reporting information on health insurance policies or contracts that also report benefit payments made directly to participants are deemed mixed-insured.

⁵ Non-health benefits include life insurance, supplemental unemployment, temporary disability, and long-term disability among others. See 2016 Instructions for Form 5500 Annual Return/Report of Employee Benefit Plan, at <http://www.dol.gov/ebsa/pdf/2016-5500inst.pdf>.

SOURCE: 2016 Form 5500 filings.

**Table A2. Number of Group Health Plans,
Participants, Assets, and Liabilities
by type of insurance and type of plan, 2016**

All Plans

Summary Statistics by Type of Benefit	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²
Number of Plans	56,211	54,471	1,740	23,704	22,672	1,032	4,098	3,546	552	28,409	28,253	156
Health Benefits Only	8,312	8,233	79	5,125	5,066	59	182	175	7	3,005	2,992	13
Health and Other Benefits	47,899	46,238	1,661	18,579	17,606	973	3,916	3,371	545	25,404	25,261	143
Total Participants, End of Year (thousands)³	75,164	69,314	5,849	34,493	31,224	3,269	27,505	25,116	2,389	13,167	12,975	192
Health Benefits Only	5,862	5,678	184	4,054	3,881	173	587	582	5	1,221	1,214	6
Health and Other Benefits	69,302	63,636	5,665	30,438	27,343	3,096	26,918	24,533	2,384	11,946	11,760	185
Assets (millions)	\$225,487	\$149,756	\$75,731	\$82,280	\$37,730	\$44,550	\$141,084	\$110,691	\$30,393	\$2,123	\$1,334	\$788
Health Benefits Only	13,872	11,467	2,405	8,316	6,149	2,167	5,398	5,162	236	157	155	2
Health and Other Benefits	211,615	138,289	73,327	73,964	31,581	42,383	135,686	105,529	30,157	1,966	1,179	787
Liabilities (millions)	\$25,571	\$11,163	\$14,408	\$10,167	\$3,171	\$6,996	\$15,195	\$7,914	\$7,280	\$209	\$77	\$132
Health Benefits Only	791	609	182	436	257	179	353	350	3	2	2	**/
Health and Other Benefits	24,780	10,554	14,226	9,731	2,914	6,817	14,841	7,564	7,277	208	76	132

Plans with 100 or More Participants and Trusts

Summary Statistics by Type of Benefit	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²
Number of Plans	3,801	2,297	1,504	2,522	1,600	922	1,084	567	517	195	130	65
Health Benefits Only	431	385	46	353	315	38	62	57	5	16	13	3
Health and Other Benefits	3,370	1,912	1,458	2,169	1,285	884	1,022	510	512	179	117	62
Total Participants, End of Year (thousands)³	22,928	17,193	5,735	11,981	8,732	3,249	10,484	8,141	2,343	462	320	143
Health Benefits Only	983	807	176	662	492	170	275	270	4	46	45	1
Health and Other Benefits	21,945	16,386	5,559	11,319	8,240	3,079	10,210	7,871	2,339	416	275	141
Assets (millions)	\$223,871	\$148,303	\$75,569	\$80,939	\$36,489	\$44,450	\$140,927	\$110,559	\$30,368	\$2,005	\$1,255	\$750
Health Benefits Only	13,371	10,979	2,392	7,861	5,704	2,157	5,380	5,146	234	130	129	1
Health and Other Benefits	210,500	137,323	73,177	73,078	30,785	42,293	135,547	105,413	30,134	1,875	1,126	749
Liabilities (millions)	\$25,430	\$11,033	\$14,398	\$10,035	\$3,046	\$6,989	\$15,190	\$7,911	\$7,279	\$205	\$75	\$131
Health Benefits Only	774	592	182	420	241	178	353	350	3	1	1	**/
Health and Other Benefits	24,657	10,440	14,216	9,615	2,805	6,810	14,837	7,562	7,275	204	73	130

(continued...)

**Table A2. Number of Group Health Plans,
Participants, Assets, and Liabilities
by type of insurance and type of plan, 2016**

Plans with 100 or More Participants and No Trusts

Summary Statistics by Type of Benefit	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²
Number of Plans	49,277	49,189	88	18,370	18,346	24	2,873	2,867	6	28,034	27,976	58
Health Benefits Only	6,318	6,302	16	3,301	3,295	6	89	88	1	2,928	2,919	9
Health and Other Benefits	42,959	42,887	72	15,069	15,051	18	2,784	2,779	5	25,106	25,057	49
Total Participants, End of Year	52,155	52,046	109	22,441	22,424	17	17,015	16,971	44	12,699	12,651	47
Health Benefits Only	4,844	4,836	8	3,360	3,357	3	311	311	*/	1,173	1,168	5
Health and Other Benefits	47,310	47,210	101	19,082	19,067	14	16,704	16,659	44	11,525	11,483	42
Assets (millions)	-	-	-	-	-	-	-	-	-	-	-	-
Health Benefits Only	-	-	-	-	-	-	-	-	-	-	-	-
Health and Other Benefits	-	-	-	-	-	-	-	-	-	-	-	-
Liabilities (millions)	-	-	-	-	-	-	-	-	-	-	-	-
Health Benefits Only	-	-	-	-	-	-	-	-	-	-	-	-
Health and Other Benefits	-	-	-	-	-	-	-	-	-	-	-	-

Plans with Fewer Than 100 Participants and Trusts ⁴

Summary Statistics by Type of Benefit	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²
Number of Plans	3,133	2,985	148	2,812	2,726	86	141	112	29	180	147	33
Health Benefits Only	1,563	1,546	17	1,471	1,456	15	31	30	1	61	60	1
Health and Other Benefits	1,570	1,439	131	1,341	1,270	71	110	82	28	119	87	32
Total Participants, End of Year	81	75	6	70	67	3	5	4	1	6	4	2
Health Benefits Only	35	34	1	32	32	*/	1	1	*/	1	1	*/
Health and Other Benefits	46	41	5	38	35	2	4	3	1	4	3	2
Assets (millions)	\$1,616	\$1,453	\$163	\$1,341	\$1,241	\$99	\$157	\$132	\$25	\$118	\$79	\$38
Health Benefits Only	500	488	13	455	445	10	18	16	2	27	26	1
Health and Other Benefits	1,115	965	150	886	796	90	139	116	23	90	53	37
Liabilities (millions)	\$140	\$130	\$10	\$132	\$125	\$7	\$4	\$3	\$1	\$4	\$3	\$1
Health Benefits Only	17	17	**/	17	16	**/	**/	**/	-	**/	**/	-
Health and Other Benefits	123	114	9	115	109	6	4	3	1	4	2	1

NOTES: Participants, assets, and liabilities are tabulated as of the end of the plan year.

Totals may not equal the sum of the components due to rounding.

¹ For the purposes of this report, includes single employer plans, plans of controlled groups of corporations, and multiple employer noncollectively bargained plans.

² For the purposes of this report, includes multiemployer plans and multiple employer collectively bargained plans.

³ For the purposes of this report, includes active, retired, and separated participants either receiving benefits or entitled to future benefits.

⁴ For the purposes of this report, includes only plans with fewer than 100 participants as of the end of the plan year.

*/ Fewer than 500 participants.

**/ Less than \$500,000.

- Missing or not applicable.

SOURCE: 2016 Form 5500 filings.

**Table A3. Number of Participants in Group Health Plans
by type of insurance, type of plan, and type of participant, 2016**
(thousands)

All Plans

Type of Participant	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²
Active Participants, End of Year ³	66,987	62,462	4,525	30,836	28,343	2,492	23,445	21,596	1,849	12,706	12,522	183
Retired or Separated Participants Receiving Benefits, End of Year	7,662	6,391	1,271	3,425	2,690	736	3,851	3,323	528	386	378	8
Other Retired or Separated Participants Entitled to Future Benefits, End of Year	515	461	54	232	191	41	208	196	12	75	75	*/
Total Participants, End of Year	75,164	69,314	5,849	34,493	31,224	3,269	27,505	25,116	2,389	13,167	12,975	192

Plans with 100 or More Participants and Trusts

Type of Participant	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²
Active Participants, End of Year ³	17,563	13,144	4,419	9,599	7,126	2,473	7,540	5,730	1,810	423	288	136
Retired or Separated Participants Receiving Benefits, End of Year	5,144	3,880	1,264	2,261	1,526	735	2,846	2,324	523	37	30	7
Other Retired or Separated Participants Entitled to Future Benefits, End of Year	222	170	52	122	81	41	98	88	10	2	2	*/
Total Participants, End of Year	22,928	17,193	5,735	11,981	8,732	3,249	10,484	8,141	2,343	462	320	143

(continued...)

**Table A3. Number of Participants in Group Health Plans
by type of insurance, type of plan, and type of participant, 2016**
(thousands)

Plans with 100 or More Participants and No Trusts

Type of Participant	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²
Active Participants, End of Year ³	49,349	49,248	101	21,171	21,154	17	15,901	15,863	38	12,277	12,231	46
Retired or Separated Participants Receiving Benefits, End of Year	2,513	2,507	7	1,161	1,161	*/	1,004	999	5	348	347	1
Other Retired or Separated Participants Entitled to Future Benefits, End of Year	293	292	2	110	110	-	110	109	2	73	73	*/
Total Participants, End of Year	52,155	52,046	109	22,441	22,424	17	17,015	16,971	44	12,699	12,651	47

Plans with Fewer Than 100 Participants and Trusts ⁴

Type of Participant	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²
Active Participants, End of Year ³	75	70	5	66	63	3	4	3	1	5	4	1
Retired or Separated Participants Receiving Benefits, End of Year	5	5	1	4	3	*/	1	1	*/	1	*/	*/
Other Retired or Separated Participants Entitled to Future Benefits, End of Year	*/	*/	*/	*/	*/	*/	*/	*/	*/	*/	*/	*/
Total Participants, End of Year	81	75	6	70	67	3	5	4	1	6	4	2

NOTES: Participants are tabulated as of the end of the plan year.

Totals may not equal the sum of the components due to rounding.

¹ For the purposes of this report, includes single employer plans, plans of controlled groups of corporations, and multiple employer noncollectively bargained plans.

² For the purposes of this report, includes multiemployer plans and multiple employer collectively bargained plans.

³ For Form 5500-SF filers, all reported participants are assumed to be active.

⁴ For the purposes of this report, includes only plans with fewer than 100 participants as of the end of the plan year.

*/ Fewer than 500 participants.

- Missing or not applicable.

SOURCE: 2016 Form 5500 filings.

**Table A4. Selected Income of Group Health Plans
by type of insurance and type of plan, 2016**
(millions)

All Plans with Trusts

Selected Income	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²
CONTRIBUTIONS	\$148,958	\$91,870	\$57,089	\$59,092	\$27,583	\$31,509	\$86,681	\$62,066	\$24,614	\$3,186	\$2,220	\$966
Employer Contributions	121,630	68,252	53,378	49,924	20,734	29,190	68,928	45,649	23,280	2,778	1,869	909
Participant Contributions	25,608	22,336	3,272	8,404	6,449	1,954	16,881	15,606	1,275	323	280	43
Contributions from Others (Including Rollovers)	1,713	1,274	439	757	392	365	871	811	60	85	71	14
Noncash Contributions	8	7	**/	7	7	**/	**/	**/	-	**/	**/	-
INVESTMENT INCOME ³	\$10,496	\$8,202	\$2,294	\$3,428	\$1,987	\$1,441	\$7,007	\$6,163	\$844	\$61	\$52	\$9

Plans with 100 or More Participants and Trusts

Selected Income	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²
CONTRIBUTIONS	\$148,041	\$91,055	\$56,986	\$58,373	\$26,911	\$31,462	\$86,533	\$61,953	\$24,580	\$3,135	\$2,190	\$944
Employer Contributions	120,875	67,592	53,283	49,340	20,195	29,145	68,799	45,552	23,247	2,736	1,845	891
Participant Contributions	25,454	22,190	3,264	8,276	6,325	1,952	16,864	15,591	1,273	314	274	40
Contributions from Others (Including Rollovers)	1,704	1,266	438	749	385	364	870	810	60	85	71	14
Noncash Contributions	7	7	**/	7	7	**/	-	-	-	-	-	-
INVESTMENT INCOME ³	\$10,392	\$8,104	\$2,289	\$3,339	\$1,901	\$1,438	\$7,001	\$6,157	\$844	\$53	\$46	\$7

(continued...)

**Table A4. Selected Income of Group Health Plans
by type of insurance and type of plan, 2016**
(millions)

Plans with Fewer Than 100 Participants and Trusts ⁴

Selected Income	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²
CONTRIBUTIONS	\$918	\$815	\$103	\$719	\$672	\$47	\$147	\$113	\$34	\$51	\$30	\$21
Employer Contributions	755	660	95	584	539	44	129	97	33	42	24	18
Participant Contributions	154	146	8	127	125	3	17	16	2	9	6	3
Contributions from Others (Including Rollovers)	8	8	**/	8	8	**/	**/	**/	**/	**/	**/	**/
Noncash Contributions	**/	**/	-	**/	**/	-	**/	**/	-	**/	**/	-
INVESTMENT INCOME ³	\$104	\$99	\$6	\$89	\$86	\$3	\$7	\$6	**/	\$8	\$6	\$2

NOTES: The panel for plans with 100 or more participants and no trusts was not reported as these plans are not required to file a Schedule H; thus, these plans have no financial information to report.

Totals may not equal the sum of the components due to rounding.

¹ For the purposes of this report, includes single employer plans, plans of controlled groups of corporations, and multiple employer noncollectively bargained plans.

² For the purposes of this report, includes multiemployer plans and multiple employer collectively bargained plans.

³ For Schedule H filers, Investment Income is equal to the sum of all income items on the Schedule H except for contributions and other income. For Schedule I and Form 5500-SF filers, Investment Income is equal to the Other Income line item of the Schedule I or Form 5500-SF.

⁴ For the purposes of this report, includes only plans with fewer than 100 participants as of the end of the plan year.

**/ Less than \$500,000.

- Missing or not applicable.

SOURCE: 2016 Form 5500 filings.

**Table A5. Selected Expenses of Group Health Plans
by type of insurance and type of plan, 2016**
(millions)

All Plans with Trusts

Selected Expenses	All Plans			Self-Insured			Mixed-Insured			Fully Insured ¹		
	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³
BENEFIT PAYMENTS ⁴	\$144,978	\$92,856	\$52,122	\$55,973	\$26,960	\$29,012	\$85,924	\$63,700	\$22,225	\$3,080	\$2,196	\$884
Directly to Participants or Beneficiaries (Including Rollovers)	104,609	67,702	36,907	44,360	21,780	22,579	60,249	45,922	14,327	-	-	-
To Insurance Carriers for the Provision of Benefits	33,173	22,604	10,570	6,598	3,626	2,972	23,919	16,858	7,061	2,657	2,120	536
Other ⁵	7,195	2,550	4,645	5,015	1,555	3,461	1,756	920	837	424	76	348
ADMINISTRATIVE EXPENSES ⁶	\$8,720	\$5,413	\$3,307	\$4,007	\$2,020	\$1,986	\$4,592	\$3,317	\$1,275	\$121	\$76	\$45
Professional Fees	1,025	606	420	485	266	219	518	326	193	22	14	8
Contract Administrator Fees	3,861	2,866	995	1,537	957	579	2,266	1,868	398	58	40	18
Investment Advisory and Management Fees	461	318	143	147	57	90	310	258	52	4	3	1
Other	3,373	1,623	1,749	1,838	740	1,098	1,498	865	633	37	18	18

Plans with 100 or More Participants and Trusts

Selected Expenses	All Plans			Self-Insured			Mixed-Insured			Fully Insured ¹		
	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³
BENEFIT PAYMENTS ⁴	\$144,179	\$92,149	\$52,030	\$55,391	\$26,422	\$28,970	\$85,755	\$63,560	\$22,195	\$3,033	\$2,167	\$866
Directly to Participants or Beneficiaries (Including Rollovers)	104,399	67,514	36,885	44,223	21,662	22,561	60,176	45,852	14,324	-	-	-
To Insurance Carriers for the Provision of Benefits	33,078	22,548	10,530	6,572	3,609	2,963	23,861	16,822	7,039	2,645	2,117	528
Other ⁵	6,702	2,087	4,615	4,596	1,150	3,446	1,719	886	832	387	50	337
ADMINISTRATIVE EXPENSES ⁶	\$8,639	\$5,345	\$3,294	\$3,941	\$1,963	\$1,978	\$4,579	\$3,307	\$1,272	\$119	\$75	\$44
Professional Fees	1,018	601	417	480	262	218	516	324	192	22	14	7
Contract Administrator Fees	3,851	2,858	993	1,530	952	578	2,264	1,866	398	58	40	18
Investment Advisory and Management Fees	459	317	142	146	57	89	309	258	52	4	3	1
Other	3,311	1,569	1,741	1,786	692	1,093	1,490	859	631	35	18	17

(continued...)

**Table A5. Selected Expenses of Group Health Plans
by type of insurance and type of plan, 2016**
(millions)

Plans with Fewer Than 100 Participants and Trusts ⁷

Selected Expenses	All Plans			Self-Insured			Mixed-Insured			Fully Insured ¹		
	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³
BENEFIT PAYMENTS ⁴	\$798	\$707	\$91	\$582	\$539	\$43	\$169	\$140	\$29	\$48	\$29	\$19
Directly to Participants or Beneficiaries (Including Rollovers)	210	188	22	136	118	19	73	71	3	-	-	-
To Insurance Carriers for the Provision of Benefits	95	56	40	26	16	9	58	36	22	11	3	8
Other ⁵	493	463	30	419	404	15	38	33	4	36	26	11
ADMINISTRATIVE EXPENSES ⁶	\$81	\$67	\$14	\$65	\$57	\$9	\$13	\$10	\$3	\$2	\$1	\$2
Professional Fees	7	5	3	5	4	2	2	1	1	**/	**/	**/
Contract Administrator Fees	10	8	2	7	5	2	3	3	**/	**/	**/	**/
Investment Advisory and Management Fees	1	1	**/	1	**/	**/	**/	**/	**/	**/	-	**/
Other	62	54	8	53	48	5	8	6	2	2	1	1

NOTES: The Plans with 100 or More Participants and No Trusts panel was not reported as these plans are not required to file a Schedule H; thus, these plans have no financial information to report.

Totals may not equal the sum of the components due to rounding.

¹ Plans classified as fully insured do not report benefit payments made directly to participants. According to the plan funding classification algorithm outlined in Appendix A1, plans reporting information on health insurance policies or contracts that also report benefit payments made directly to participants are deemed mixed-insured.

² For the purposes of this report, includes single employer plans, plans of controlled groups of corporations, and multiple employer noncollectively bargained plans.

³ For the purposes of this report, includes multiemployer plans and multiple employer collectively bargained plans.

⁴ Amounts shown include both benefits paid directly to participants and beneficiaries from trust funds and premium payments made by plans to insurance carriers. Amounts exclude benefits paid directly by insurance carriers. Plans classified as fully insured do not report benefit payments made directly to participants. Reported benefit payments for these plans are paid to insurance companies for the provision of benefits. According to the plan funding classification algorithm outlined in Appendix A1, plans reporting information on health insurance policies or contracts that also report benefit payments made directly to participants are deemed mixed-insured.

⁵ For Schedule I and Form 5500-SF filers, Other Benefit Payments is equal to Benefits Paid reported on Schedule I.

⁶ For Schedule I and Form 5500-SF filers, Administrative Expenses is equal to Administrative Service Providers (salaries, fees, commissions). All of these expenses are classified as Other Administrative Expenses.

⁷ For the purposes of this report, includes only plans with fewer than 100 participants as of the end of the plan year.

**/ Less than \$500,000.

- Missing or not applicable.

SOURCE: 2016 Form 5500 filings.

**Table A6. Balance Sheet of Group Health Plans with 100 or More Participants & Trusts
by type of insurance and type of plan, 2016**
(millions)

Assets ¹	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³
TOTAL ASSETS	\$223,871	\$148,303	\$75,569	\$80,939	\$36,489	\$44,450	\$140,927	\$110,559	\$30,368	\$2,005	\$1,255	\$750
Cash	17,192	9,109	8,083	7,238	2,845	4,392	9,578	6,083	3,495	376	180	196
Receivables	13,231	6,436	6,795	5,776	1,600	4,176	7,372	4,803	2,569	83	33	50
U.S. Government Securities	20,322	10,067	10,255	6,371	1,287	5,084	13,775	8,660	5,115	177	120	57
Debt Instruments	22,848	12,461	10,387	7,328	2,188	5,141	15,359	10,148	5,211	161	125	36
Stock	40,381	34,824	5,557	7,906	3,934	3,972	32,447	30,875	1,573	28	15	12
Partnership/Joint Venture Interests	17,455	14,820	2,636	2,272	565	1,707	15,143	14,214	929	40	40	-
Real Estate	570	218	352	326	121	206	244	97	146	-	-	-
Loans	1,307	35	1,272	76	35	41	1,231	**/	1,231	-	-	-
Assets in Direct Filing Entities	38,697	28,252	10,446	18,388	11,520	6,868	20,223	16,674	3,549	87	58	29
Assets in Registered Investment Companies	35,069	19,154	15,915	18,531	8,623	9,909	15,778	10,136	5,642	760	395	365
Assets in Insurance Co. General Accounts	3,598	3,118	480	1,924	1,548	377	1,674	1,571	103	-	-	-
Other	13,200	9,809	3,391	4,803	2,224	2,579	8,103	7,296	807	294	289	5

Percentage Distribution of Assets ¹	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³
Cash	8%	6%	11%	9%	8%	10%	7%	6%	12%	19%	14%	26%
Receivables	6%	4%	9%	7%	4%	9%	5%	4%	8%	4%	3%	7%
U.S. Government Securities	9%	7%	14%	8%	4%	11%	10%	8%	17%	9%	10%	8%
Debt Instruments	10%	8%	14%	9%	6%	12%	11%	9%	17%	8%	10%	5%
Stock	18%	23%	7%	10%	11%	9%	23%	28%	5%	1%	1%	2%
Partnership/Joint Venture Interests	8%	10%	3%	3%	2%	4%	11%	13%	3%	2%	3%	0%
Real Estate	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Loans	1%	0%	2%	0%	0%	0%	1%	0%	4%	0%	0%	0%
Assets in Direct Filing Entities	17%	19%	14%	23%	32%	15%	14%	15%	12%	4%	5%	4%
Assets in Registered Investment Companies	16%	13%	21%	23%	24%	22%	11%	9%	19%	38%	31%	49%
Assets in Insurance Co. General Accounts	2%	2%	1%	2%	4%	1%	1%	1%	0%	0%	0%	0%
Other	6%	7%	4%	6%	6%	6%	6%	7%	3%	15%	23%	1%

NOTES: Assets are tabulated as of the end of the plan year.

Totals may not equal the sum of the components due to rounding.

¹ Asset categories in this table represent consolidated categories from the Schedule H. Cash consists of interest- and noninterest-bearing cash. Receivables consists of employer and participant contributions and other receivables. Debt instruments consists of preferred and other debt instruments. Stock consists of common and preferred stock. Loans consists of participant loans and loans (other than to participants). Assets in direct filing entities consists of assets in master trusts, common trusts, pooled separate accounts, and 103-12 investment entities. Other consists of employer securities (Line 1d(1)), employer real property (Line 1d(2)), buildings and other property used in plan operation (Line 1e), and other (Line 1c(15)) of the Schedule H.

² For the purposes of this report, includes single employer plans, plans of controlled groups of corporations and multiple employer noncollectively bargained plans.

³ For the purposes of this report, includes multiemployer plans and multiple employer collectively bargained plans.

**/ Less than \$500,000.

- Missing or not applicable.

SOURCE: 2016 Form 5500 filings.

**Table A7. Number of Group Health Plans
by type of insurance, type of plan, and method of funding, 2016**

All Plans

Method of Funding	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²
Funding Arrangement												
Total	56,211	54,471	1,740	23,704	22,672	1,032	4,098	3,546	552	28,409	28,253	156
Insurance	18,087	18,022	65	815	810	5	50	44	6	17,222	17,168	54
Trust	2,272	1,226	1,046	1,696	1,056	640	444	91	353	132	79	53
Trust and Insurance	2,103	1,536	567	1,469	1,116	353	508	325	183	126	95	31
General Assets of the Sponsor	6,493	6,482	11	4,944	4,936	8	189	189	-	1,360	1,357	3
General Assets of the Sponsor and Insurance	25,122	25,079	43	12,858	12,838	20	2,712	2,704	8	9,552	9,537	15
Trust and General Assets of the Sponsor	166	163	3	134	131	3	28	28	-	4	4	-
Trust, General Assets of the Sponsor, and Insurance	456	451	5	280	277	3	167	165	2	9	9	-
Not Reported ³	1,512	1,512	-	1,508	1,508	-	-	-	-	4	4	-
Benefit Arrangement												
Total	56,211	54,471	1,740	23,704	22,672	1,032	4,098	3,546	552	28,409	28,253	156
Insurance	19,417	19,311	106	1,002	989	13	194	175	19	18,221	18,147	74
Trust	1,095	873	222	1,079	866	213	14	5	9	2	2	-
Trust and Insurance	3,143	1,791	1,352	2,066	1,292	774	904	393	511	173	106	67
General Assets of the Sponsor	4,635	4,631	4	4,546	4,542	4	13	13	-	76	76	-
General Assets of the Sponsor and Insurance	25,816	25,771	45	13,103	13,081	22	2,787	2,779	8	9,926	9,911	15
Trust and General Assets of the Sponsor	104	102	2	104	102	2	-	-	-	-	-	-
Trust, General Assets of the Sponsor, and Insurance	489	480	9	296	292	4	186	181	5	7	7	-
Not Reported ³	1,512	1,512	-	1,508	1,508	-	-	-	-	4	4	-

(continued...)

**Table A7. Number of Group Health Plans
by type of insurance, type of plan, and method of funding, 2016**

Plans with 100 or More Participants and Trusts

Method of Funding	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²
Funding Arrangement												
Total	3,801	2,297	1,504	2,522	1,600	922	1,084	567	517	195	130	65
Insurance	79	69	10	31	30	1	21	18	3	27	21	6
Trust	1,459	505	954	969	391	578	411	75	336	79	39	40
Trust and Insurance	1,534	1,005	529	1,013	678	335	454	279	175	67	48	19
General Assets of the Sponsor	21	20	1	15	14	1	3	3	-	3	3	-
General Assets of the Sponsor and Insurance	138	133	5	108	105	3	21	19	2	9	9	-
Trust and General Assets of the Sponsor	133	130	3	105	102	3	25	25	-	3	3	-
Trust, General Assets of the Sponsor, and Insurance	412	410	2	256	255	1	149	148	1	7	7	-
Not Reported ³	25	25	-	25	25	-	-	-	-	-	-	-
Benefit Arrangement												
Total	3,801	2,297	1,504	2,522	1,600	922	1,084	567	517	195	130	65
Insurance	193	154	39	60	53	7	49	37	12	84	64	20
Trust	440	257	183	428	253	175	10	2	8	2	2	-
Trust and Insurance	2,464	1,195	1,269	1,541	808	733	825	334	491	98	53	45
General Assets of the Sponsor	2	2	-	2	2	-	-	-	-	-	-	-
General Assets of the Sponsor and Insurance	154	149	5	120	117	3	29	27	2	5	5	-
Trust and General Assets of the Sponsor	77	75	2	77	75	2	-	-	-	-	-	-
Trust, General Assets of the Sponsor, and Insurance	446	440	6	269	267	2	171	167	4	6	6	-
Not Reported ³	25	25	-	25	25	-	-	-	-	-	-	-

(continued...)

**Table A7. Number of Group Health Plans
by type of insurance, type of plan, and method of funding, 2016**

Plans with 100 or More Participants and No Trusts

Method of Funding	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²
Funding Arrangement												
Total	49,277	49,189	88	18,370	18,346	24	2,873	2,867	6	28,034	27,976	58
Insurance	17,902	17,860	42	758	756	2	9	9	-	17,135	17,095	40
Trust	-	-	-	-	-	-	-	-	-	-	-	-
Trust and Insurance	-	-	-	-	-	-	-	-	-	-	-	-
General Assets of the Sponsor	6,457	6,449	8	4,917	4,912	5	185	185	-	1,355	1,352	3
General Assets of the Sponsor and Insurance	24,914	24,876	38	12,695	12,678	17	2,679	2,673	6	9,540	9,525	15
Trust and General Assets of the Sponsor	-	-	-	-	-	-	-	-	-	-	-	-
Trust, General Assets of the Sponsor, and Insurance	-	-	-	-	-	-	-	-	-	-	-	-
Not Reported ³	4	4	-	-	-	-	-	-	-	4	4	-
Benefit Arrangement												
Total	49,277	49,189	88	18,370	18,346	24	2,873	2,867	6	28,034	27,976	58
Insurance	19,055	19,010	45	902	900	2	116	116	-	18,037	17,994	43
Trust	-	-	-	-	-	-	-	-	-	-	-	-
Trust and Insurance	-	-	-	-	-	-	-	-	-	-	-	-
General Assets of the Sponsor	4,631	4,627	4	4,542	4,538	4	13	13	-	76	76	-
General Assets of the Sponsor and Insurance	25,587	25,548	39	12,926	12,908	18	2,744	2,738	6	9,917	9,902	15
Trust and General Assets of the Sponsor	-	-	-	-	-	-	-	-	-	-	-	-
Trust, General Assets of the Sponsor, and Insurance	-	-	-	-	-	-	-	-	-	-	-	-
Not Reported ³	4	4	-	-	-	-	-	-	-	4	4	-

(continued...)

**Table A7. Number of Group Health Plans
by type of insurance, type of plan, and method of funding, 2016**

Plans with Fewer Than 100 Participants and Trusts ⁴

Method of Funding	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²
Funding Arrangement												
Total	3,133	2,985	148	2,812	2,726	86	141	112	29	180	147	33
Insurance	106	93	13	26	24	2	20	17	3	60	52	8
Trust	813	721	92	727	665	62	33	16	17	53	40	13
Trust and Insurance	569	531	38	456	438	18	54	46	8	59	47	12
General Assets of the Sponsor	15	13	2	12	10	2	1	1	-	2	2	-
General Assets of the Sponsor and Insurance	70	70	-	55	55	-	12	12	-	3	3	-
Trust and General Assets of the Sponsor	33	33	-	29	29	-	3	3	-	1	1	-
Trust, General Assets of the Sponsor, and Insurance	44	41	3	24	22	2	18	17	1	2	2	-
Not Reported ³	1,483	1,483	-	1,483	1,483	-	-	-	-	-	-	-
Benefit Arrangement												
Total	3,133	2,985	148	2,812	2,726	86	141	112	29	180	147	33
Insurance	169	147	22	40	36	4	29	22	7	100	89	11
Trust	655	616	39	651	613	38	4	3	1	-	-	-
Trust and Insurance	679	596	83	525	484	41	79	59	20	75	53	22
General Assets of the Sponsor	2	2	-	2	2	-	-	-	-	-	-	-
General Assets of the Sponsor and Insurance	75	74	1	57	56	1	14	14	-	4	4	-
Trust and General Assets of the Sponsor	27	27	-	27	27	-	-	-	-	-	-	-
Trust, General Assets of the Sponsor, and Insurance	43	40	3	27	25	2	15	14	1	1	1	-
Not Reported ³	1,483	1,483	-	1,483	1,483	-	-	-	-	-	-	-

NOTES: Values in this table are representative of the indication of funding arrangement (Form 5500 line item 9(a)) and benefit arrangement (Form 5500 line item 9(b)) as originally reported by the plans. Plans were categorized into the three subpanels of (1) Plans with 100 or More Participants and Trusts, (2) Plans with 100 or More Participants and No Trusts, and (3) Plans with Fewer Than 100 Participants and Trusts based on the response to either the funding arrangement indicator, benefit arrangement indicator, or the inclusion of a financial schedule. Thus, this table shows a positive number of plans on the "Insurance" rows in the panels for plans with trusts.

Totals may not equal the sum of the components due to rounding.

¹ For the purposes of this report, includes single employer plans, plans of controlled groups of corporations, and multiple employer noncollectively bargained plans.

² For the purposes of this report, includes multiemployer plans and multiple employer collectively bargained plans.

³ The Form 5500-SF does not require plans to report on the funding nor benefit arrangements.

⁴ For the purposes of this report, includes only plans with fewer than 100 participants as of the end of the plan year.

- Missing or not applicable.

SOURCE: 2016 Form 5500 filings.

**Table A8. Number of Group Health Plans and Total Participants
by collective bargaining status, type of insurance, and type of plan, 2016**

All Plans		All Plans		Self-Insured		Mixed-Insured		Fully Insured	
Collective Bargaining Status / Plan Entity		Number of Plans	Total Participants, End of Year (thousands) ³	Number of Plans	Total Participants, End of Year (thousands) ³	Number of Plans	Total Participants, End of Year (thousands) ³	Number of Plans	Total Participants, End of Year (thousands) ³
Total	Total	56,211	75,164	23,704	34,493	4,098	27,505	28,409	13,167
	Single Employer ¹	54,471	69,314	22,672	31,224	3,546	25,116	28,253	12,975
	Multiemployer ²	1,740	5,849	1,032	3,269	552	2,389	156	192
Noncollectively Bargained Plans	Total	52,820	60,910	21,794	28,237	3,203	20,818	27,823	11,855
	Single Employer ¹	52,820	60,910	21,794	28,237	3,203	20,818	27,823	11,855
Collective Bargaining Plans	Total	3,391	14,253	1,910	6,255	895	6,686	586	1,311
	Single Employer ¹	1,651	8,404	878	2,986	343	4,298	430	1,120
	Multiemployer ²	1,740	5,849	1,032	3,269	552	2,389	156	192

Plans with 100 or More Participants and Trusts

All Plans		All Plans		Self-Insured		Mixed-Insured		Fully Insured	
Collective Bargaining Status / Plan Entity		Number of Plans	Total Participants, End of Year (thousands) ³	Number of Plans	Total Participants, End of Year (thousands) ³	Number of Plans	Total Participants, End of Year (thousands) ³	Number of Plans	Total Participants, End of Year (thousands) ³
Total	Total	3,801	22,928	2,522	11,981	1,084	10,484	195	462
	Single Employer ¹	2,297	17,193	1,600	8,732	567	8,141	130	320
	Multiemployer ²	1,504	5,735	922	3,249	517	2,343	65	143
Noncollectively Bargained Plans	Total	1,989	14,132	1,419	7,826	455	6,012	115	294
	Single Employer ¹	1,989	14,132	1,419	7,826	455	6,012	115	294
Collective Bargaining Plans	Total	1,812	8,796	1,103	4,156	629	4,473	80	168
	Single Employer ¹	308	3,061	181	907	112	2,129	15	25
	Multiemployer ²	1,504	5,735	922	3,249	517	2,343	65	143

(continued...)

**Table A8. Number of Group Health Plans and Total Participants
by collective bargaining status, type of insurance, and type of plan, 2016**

Plans with 100 or More Participants and No Trusts

Collective Bargaining Status / Plan Entity		All Plans		Self-Insured		Mixed-Insured		Fully Insured	
		Number of Plans	Total Participants, End of Year (thousands) ³	Number of Plans	Total Participants, End of Year (thousands) ³	Number of Plans	Total Participants, End of Year (thousands) ³	Number of Plans	Total Participants, End of Year (thousands) ³
Total	Total	49,277	52,155	18,370	22,441	2,873	17,015	28,034	12,699
	Single Employer ¹	49,189	52,046	18,346	22,424	2,867	16,971	27,976	12,651
	Multiemployer ²	88	109	24	17	6	44	58	47
Noncollectively Bargained Plans	Total	47,909	46,705	17,694	20,346	2,644	14,803	27,571	11,557
	Single Employer ¹	47,909	46,705	17,694	20,346	2,644	14,803	27,571	11,557
Collective Bargaining Plans	Total	1,368	5,449	676	2,096	229	2,212	463	1,141
	Single Employer ¹	1,280	5,341	652	2,079	223	2,168	405	1,094
	Multiemployer ²	88	109	24	17	6	44	58	47

Plans with Fewer Than 100 Participants and Trusts⁴

Collective Bargaining Status / Plan Entity		All Plans		Self-Insured		Mixed-Insured		Fully Insured	
		Number of Plans	Total Participants, End of Year (thousands) ³	Number of Plans	Total Participants, End of Year (thousands) ³	Number of Plans	Total Participants, End of Year (thousands) ³	Number of Plans	Total Participants, End of Year (thousands) ³
Total	Total	3,133	81	2,812	70	141	5	180	6
	Single Employer ¹	2,985	75	2,726	67	112	4	147	4
	Multiemployer ²	148	6	86	3	29	1	33	2
Noncollectively Bargained Plans	Total	2,922	73	2,681	66	104	4	137	4
	Single Employer ¹	2,922	73	2,681	66	104	4	137	4
Collective Bargaining Plans	Total	211	8	131	4	37	2	43	2
	Single Employer ¹	63	2	45	1	8	*/	10	*/
	Multiemployer ²	148	6	86	3	29	1	33	2

NOTES: Participants are tabulated as of the end of the plan year.

Totals may not equal the sum of the components due to rounding.

¹ For the purposes of this report, includes single employer plans, plans of controlled groups of corporations, and multiple employer noncollectively bargained plans.

² For the purposes of this report, includes multiemployer plans and multiple employer collectively bargained plans.

³ For the purposes of this report, includes active, retired, and separated participants either receiving benefits or entitled to future benefits.

⁴ For the purposes of this report, includes only plans with fewer than 100 participants as of the end of the plan year.

*/ Fewer than 500 participants.

SOURCE: 2016 Form 5500 filings.

**Table A9. Distribution of Group Health Plans
by type of insurance, type of plan, and number of participants, 2016**

All Plans

Total Participants, End of Year ¹	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³
Total	56,211	54,471	1,740	23,704	22,672	1,032	4,098	3,546	552	28,409	28,253	156
None or Not Reported	1,859	1,818	41	1,085	1,053	32	24	18	6	750	747	3
1-49	2,229	2,178	51	1,954	1,932	22	68	56	12	207	190	17
50-99	1,685	1,624	61	813	780	33	60	49	11	812	795	17
100-249	23,421	23,241	180	6,867	6,773	94	463	410	53	16,091	16,058	33
250-499	11,804	11,519	285	4,759	4,601	158	505	410	95	6,540	6,508	32
500-999	6,520	6,200	320	3,409	3,222	187	617	509	108	2,494	2,469	25
1,000-4,999	6,523	5,943	580	3,781	3,401	380	1,431	1,252	179	1,311	1,290	21
5,000 or More	2,170	1,948	222	1,036	910	126	930	842	88	204	196	8
Per Plan Statistics												
Mean Number of Participants	1,337	1,272	3,362	1,455	1,377	3,168	6,712	7,083	4,328	463	459	1,228
Median Number of Participants	237	232	868	290	278	967	1,382	1,474	956	196	196	272

Plans with Trusts

Total Participants, End of Year ¹	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³
Total	6,934	5,282	1,652	5,334	4,326	1,008	1,225	679	546	375	277	98
None or Not Reported	399	361	38	370	338	32	24	18	6	5	5	-
1-49	2,089	2,038	51	1,896	1,874	22	65	53	12	128	111	17
50-99	645	586	59	546	514	32	52	41	11	47	31	16
100-249	787	633	154	588	502	86	140	87	53	59	44	15
250-499	673	414	259	459	307	152	178	84	94	36	23	13
500-999	648	342	306	428	244	184	186	79	107	34	19	15
1,000-4,999	1,130	561	569	755	380	375	326	149	177	49	32	17
5,000 or More	563	347	216	292	167	125	254	168	86	17	12	5
Per Plan Statistics												
Mean Number of Participants	3,318	3,269	3,475	2,259	2,034	3,226	8,563	11,996	4,294	1,248	1,168	1,471
Median Number of Participants	149	67	915	83	46	992	886	807	931	114	88	253

(continued...)

**Table A9. Distribution of Group Health Plans
by type of insurance, type of plan, and number of participants, 2016**

Plans with No Trusts

Total Participants, End of Year ¹	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³
Total	49,277	49,189	88	18,370	18,346	24	2,873	2,867	6	28,034	27,976	58
None or Not Reported	1,460	1,457	3	715	715	-	-	-	-	745	742	3
1-49	140	140	-	58	58	-	3	3	-	79	79	-
50-99	1,040	1,038	2	267	266	1	8	8	-	765	764	1
100-249	22,634	22,608	26	6,279	6,271	8	323	323	-	16,032	16,014	18
250-499	11,131	11,105	26	4,300	4,294	6	327	326	1	6,504	6,485	19
500-999	5,872	5,858	14	2,981	2,978	3	431	430	1	2,460	2,450	10
1,000-4,999	5,393	5,382	11	3,026	3,021	5	1,105	1,103	2	1,262	1,258	4
5,000 or More	1,607	1,601	6	744	743	1	676	674	2	187	184	3
Per Plan Statistics												
Mean Number of Participants	1,058	1,058	1,238	1,222	1,222	713	5,922	5,919	7,402	453	452	817
Median Number of Participants	242	242	338	332	332	323	1,609	1,609	2,452	197	197	312

NOTES: Participants are tabulated as of the end of the plan year.

Totals may not equal the sum of the components due to rounding.

¹ For the purposes of this report, includes active, retired, and separated participants either receiving benefits or entitled to future benefits.

² For the purposes of this report, includes single employer plans, plans of controlled groups of corporations, and multiple employer noncollectively bargained plans.

³ For the purposes of this report, includes multiemployer plans and multiple employer collectively bargained plans.

- Missing or not applicable.

SOURCE: 2016 Form 5500 filings.

**Table A10. Distribution of Group Health Plans
by type of insurance, type of plan, and industry, 2016**

All Plans

Industry	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²
Total	56,211	54,471	1,740	23,704	22,672	1,032	4,098	3,546	552	28,409	28,253	156
Agriculture	571	564	7	328	322	6	21	20	1	222	222	-
Mining	724	722	2	414	412	2	48	48	-	262	262	-
Construction	3,481	2,887	594	1,804	1,437	367	309	102	207	1,368	1,348	20
Manufacturing	11,819	11,701	118	5,387	5,332	55	985	942	43	5,447	5,427	20
Transportation	1,910	1,773	137	898	820	78	159	112	47	853	841	12
Communications and Information	1,632	1,612	20	623	613	10	171	164	7	838	835	3
Utilities	609	606	3	372	372	-	87	86	1	150	148	2
Wholesale Trade	3,043	3,016	27	1,305	1,287	18	161	155	6	1,577	1,574	3
Retail Trade	3,654	3,578	76	1,455	1,405	50	197	180	17	2,002	1,993	9
Finance, Insurance, and Real Estate	5,944	5,460	484	2,428	2,120	308	523	380	143	2,993	2,960	33
Services	21,542	21,381	161	8,202	8,123	79	1,333	1,285	48	12,007	11,973	34
Misc. Organizations ³	1,276	1,165	111	484	425	59	104	72	32	688	668	20
Industry Not Reported	6	6	-	4	4	-	-	-	-	2	2	-

Plans with 100 or More Participants and Trusts

Industry	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²
Total	3,801	2,297	1,504	2,522	1,600	922	1,084	567	517	195	130	65
Agriculture	1	1	-	1	1	-	-	-	-	-	-	-
Mining	23	20	3	20	18	2	2	1	1	1	1	-
Construction	27	26	1	21	20	1	4	4	-	2	2	-
Manufacturing	697	142	555	450	109	341	225	25	200	22	8	14
Transportation	538	453	85	357	320	37	156	117	39	25	16	9
Communications and Information	177	60	117	112	44	68	58	15	43	7	1	6
Utilities	74	57	17	46	36	10	25	18	7	3	3	-
Wholesale Trade	149	149	-	94	94	-	52	52	-	3	3	-
Retail Trade	118	95	23	86	70	16	28	22	6	4	3	1
Finance, Insurance, and Real Estate	166	100	66	130	83	47	28	11	17	8	6	2
Services	809	380	429	524	242	282	234	102	132	51	36	15
Misc. Organizations ³	822	703	119	546	481	65	227	184	43	49	38	11
Industry Not Reported	-	-	-	-	-	-	-	-	-	-	-	-

(continued...)

**Table A10. Distribution of Group Health Plans
by type of insurance, type of plan, and industry, 2016**

Plans with 100 or More Participants and No Trusts

Industry	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²
Total	49,277	49,189	88	18,370	18,346	24	2,873	2,867	6	28,034	27,976	58
Agriculture	498	494	4	259	255	4	18	18	-	221	221	-
Mining	651	651	-	352	352	-	40	40	-	259	259	-
Construction	2,110	2,107	3	745	744	1	57	56	1	1,308	1,307	1
Manufacturing	10,929	10,915	14	4,709	4,704	5	815	814	1	5,405	5,397	8
Transportation	1,630	1,628	2	695	695	-	95	95	-	840	838	2
Communications and Information	1,442	1,440	2	468	468	-	144	144	-	830	828	2
Utilities	372	370	2	205	205	-	23	23	-	144	142	2
Wholesale Trade	2,806	2,802	4	1,103	1,101	2	132	132	-	1,571	1,569	2
Retail Trade	3,284	3,275	9	1,133	1,131	2	163	163	-	1,988	1,981	7
Finance, Insurance, and Real Estate	4,771	4,759	12	1,634	1,633	1	269	267	2	2,868	2,859	9
Services	19,782	19,753	29	6,778	6,769	9	1,066	1,064	2	11,938	11,920	18
Misc. Organizations ³	998	991	7	287	287	-	51	51	-	660	653	7
Industry Not Reported	4	4	-	2	2	-	-	-	-	2	2	-

Plans with Fewer Than 100 Participants and Trusts ⁴

Industry	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²	Total	Single Employer ¹	Multi-employer ²
Total	3,133	2,985	148	2,812	2,726	86	141	112	29	180	147	33
Agriculture	50	50	-	49	49	-	1	1	-	-	-	-
Mining	46	45	1	41	40	1	4	4	-	1	1	-
Construction	674	638	36	609	584	25	27	21	6	38	33	5
Manufacturing	352	333	19	321	308	13	14	11	3	17	14	3
Transportation	103	85	18	91	81	10	6	2	4	6	2	4
Communications and Information	116	115	1	109	109	-	2	2	-	5	4	1
Utilities	88	87	1	73	73	-	12	11	1	3	3	-
Wholesale Trade	119	119	-	116	116	-	1	1	-	2	2	-
Retail Trade	204	203	1	192	191	1	6	6	-	6	6	-
Finance, Insurance, and Real Estate	364	321	43	270	245	25	20	11	9	74	65	9
Services	938	925	13	878	873	5	40	37	3	20	15	5
Misc. Organizations ³	78	63	15	62	56	6	8	5	3	8	2	6
Industry Not Reported	1	1	-	1	1	-	-	-	-	-	-	-

NOTES: Totals may not equal the sum of the components due to rounding.

¹ For the purposes of this report, includes single employer plans, plans of controlled groups of corporations, and multiple employer noncollectively bargained plans.

² For the purposes of this report, includes multiemployer plans and multiple employer collectively bargained plans.

³ Religious, grantmaking, civic, professional, labor, and similar organizations. Does not include church plans, which are not required to file.

⁴ For the purposes of this report, includes only plans with fewer than 100 participants as of the end of the plan year.

- Missing or not applicable.

SOURCE: 2016 Form 5500 filings.

**Table A11. Distribution of Group Health Plan Participants
by type of insurance, type of plan, and number of participants, 2016**
(thousands)

All Plans

Total Participants, End of Year ¹	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total	Single Employer ²	Multi- employer ³	Total	Single Employer ²	Multi- employer ³	Total	Single Employer ²	Multi- employer ³	Total	Single Employer ²	Multi- employer ³
Total	75,164	69,314	5,849	34,493	31,224	3,269	27,505	25,116	2,389	13,167	12,975	192
1-49	38	37	1	32	32	1	2	1	*/	4	4	*/
50-99	137	133	5	63	60	2	5	4	1	70	69	1
100-249	3,816	3,785	31	1,144	1,127	17	81	72	9	2,591	2,586	5
250-499	4,124	4,020	103	1,694	1,636	57	183	149	35	2,247	2,235	12
500-999	4,534	4,299	235	2,388	2,250	138	450	370	79	1,696	1,679	17
1,000-4,999	13,809	12,565	1,244	8,017	7,195	822	3,371	2,989	382	2,422	2,382	40
5,000 or More	48,706	44,475	4,230	21,156	18,924	2,232	23,414	21,531	1,883	4,136	4,020	116

Plans with Trusts

Total Participants, End of Year ¹	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total	Single Employer ²	Multi- employer ³	Total	Single Employer ²	Multi- employer ³	Total	Single Employer ²	Multi- employer ³	Total	Single Employer ²	Multi- employer ³
Total	23,009	17,268	5,741	12,051	8,799	3,252	10,490	8,145	2,344	468	324	144
1-49	34	33	1	31	30	1	1	1	*/	2	2	*/
50-99	47	42	4	39	37	2	4	3	1	4	2	1
100-249	130	103	27	97	81	16	24	14	9	9	7	2
250-499	243	149	94	165	109	55	65	31	34	13	9	5
500-999	469	244	226	310	174	136	135	56	78	25	14	11
1,000-4,999	2,493	1,266	1,226	1,660	844	816	731	354	377	102	68	34
5,000 or More	19,593	15,431	4,161	9,750	7,524	2,226	9,530	7,685	1,845	313	222	91

Plans with No Trusts

Total Participants, End of Year ¹	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total	Single Employer ²	Multi- employer ³	Total	Single Employer ²	Multi- employer ³	Total	Single Employer ²	Multi- employer ³	Total	Single Employer ²	Multi- employer ³
Total	52,155	52,046	109	22,441	22,424	17	17,015	16,971	44	12,699	12,651	47
1-49	4	4	-	2	2	-	*/	*/	-	2	2	-
50-99	91	90	*/	24	23	*/	1	1	-	66	66	*/
100-249	3,686	3,682	4	1,048	1,046	1	57	57	-	2,582	2,579	3
250-499	3,880	3,871	9	1,529	1,527	2	118	118	*/	2,233	2,227	7
500-999	4,064	4,055	9	2,077	2,076	2	315	314	1	1,672	1,665	6
1,000-4,999	11,316	11,299	17	6,357	6,351	6	2,640	2,635	5	2,320	2,313	6
5,000 or More	29,113	29,044	69	11,406	11,400	6	13,884	13,846	38	3,823	3,798	25

NOTES: Participants are tabulated as of the end of the plan year.

Totals may not equal the sum of the components due to rounding.

¹ For the purposes of this report, includes active, retired, and separated participants, either receiving benefits or entitled to future benefits.

² For the purposes of this report, includes single employer plans, plans of controlled groups of corporations, and multiple employer noncollectively bargained plans.

³ For the purposes of this report, includes multiemployer plans and multiple employer collectively bargained plans.

*/ Fewer than 500 participants.

- Missing or not applicable.

SOURCE: 2016 Form 5500 filings.

**Table A12. Distribution of Group Health Plan Participants
by type of insurance, type of plan, and industry, 2016**
(thousands)

All Plans

Industry	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total ¹	Single Employer ²	Multi-employer ³	Total ¹	Single Employer ²	Multi-employer ³	Total ¹	Single Employer ²	Multi-employer ³	Total ¹	Single Employer ²	Multi-employer ³
Total	75,164	69,314	5,849	34,493	31,224	3,269	27,505	25,116	2,389	13,167	12,975	192
Agriculture	407	394	12	281	273	7	54	49	5	73	73	-
Mining	488	488	1	313	312	1	101	101	-	74	74	-
Construction	2,284	1,073	1,211	1,221	528	693	669	171	498	394	374	20
Manufacturing	14,182	13,535	647	5,567	5,401	166	6,219	5,749	470	2,395	2,385	11
Transportation	4,081	3,046	1,035	1,807	1,211	597	1,569	1,142	427	706	694	12
Communications and Information	3,637	3,448	188	1,321	1,227	94	2,004	1,910	94	311	311	*/
Utilities	1,196	1,187	9	798	798	-	314	314	*/	83	74	9
Wholesale Trade	2,144	2,072	72	889	837	52	783	764	19	472	471	1
Retail Trade	9,781	9,294	487	3,233	2,939	294	5,462	5,275	187	1,087	1,080	6
Finance, Insurance, and Real Estate	8,235	6,883	1,352	3,699	2,932	767	3,022	2,535	487	1,514	1,416	98
Services	22,838	22,146	692	9,827	9,331	496	7,198	7,032	166	5,813	5,784	29
Misc. Organizations ⁴	5,886	5,743	143	5,535	5,431	103	108	74	34	243	238	5
Industry Not Reported	-	-	-	-	-	-	-	-	-	-	-	-

Plans with 100 or More Participants and Trusts

Industry	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total ¹	Single Employer ²	Multi-employer ³	Total ¹	Single Employer ²	Multi-employer ³	Total ¹	Single Employer ²	Multi-employer ³	Total ¹	Single Employer ²	Multi-employer ³
Total	22,928	17,193	5,735	11,981	8,732	3,249	10,484	8,141	2,343	462	320	143
Agriculture	43	32	10	38	32	5	5	*/	5	*/	*/	-
Mining	29	29	1	20	19	1	9	9	-	*/	*/	-
Construction	1,300	116	1,184	766	74	692	512	40	472	22	2	20
Manufacturing	2,850	2,231	619	1,004	846	158	1,831	1,373	457	15	11	3
Transportation	1,500	467	1,033	731	134	596	758	332	427	11	1	10
Communications and Information	1,210	1,022	188	145	51	94	1,064	970	94	1	1	-
Utilities	654	654	-	430	430	-	221	221	-	3	3	-
Wholesale Trade	319	248	71	125	73	51	192	173	19	2	2	*/
Retail Trade	2,621	2,137	483	535	243	293	2,079	1,892	187	6	2	3
Finance, Insurance, and Real Estate	3,476	2,143	1,333	1,531	765	766	1,682	1,197	486	263	181	82
Services	3,673	3,000	673	1,497	1,007	489	2,073	1,911	161	104	82	22
Misc. Organizations ⁴	5,251	5,111	140	5,158	5,055	103	57	23	34	36	33	3
Industry Not Reported	-	-	-	-	-	-	-	-	-	-	-	-

(continued...)

**Table A12. Distribution of Group Health Plan Participants
by type of insurance, type of plan, and industry, 2016**
(thousands)

Plans with 100 or More Participants and No Trusts

Industry	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total ¹	Single Employer ²	Multi-employer ³	Total ¹	Single Employer ²	Multi-employer ³	Total ¹	Single Employer ²	Multi-employer ³	Total ¹	Single Employer ²	Multi-employer ³
Total	52,155	52,046	109	22,441	22,424	17	17,015	16,971	44	12,699	12,651	47
Agriculture	363	361	2	242	240	2	48	48	-	73	73	-
Mining	458	458	-	292	292	-	92	92	-	74	74	-
Construction	968	942	26	441	441	*/	156	130	26	371	371	*/
Manufacturing	11,321	11,293	27	4,553	4,545	7	4,388	4,376	13	2,380	2,372	7
Transportation	2,579	2,577	2	1,074	1,074	-	810	810	-	695	693	2
Communications and Information	2,424	2,423	*/	1,174	1,174	-	940	940	-	310	310	*/
Utilities	539	530	9	366	366	-	93	93	-	79	71	9
Wholesale Trade	1,822	1,821	1	761	761	*/	591	591	-	470	470	1
Retail Trade	7,155	7,152	3	2,693	2,692	1	3,382	3,382	-	1,080	1,078	3
Finance, Insurance, and Real Estate	4,749	4,732	18	2,160	2,159	*/	1,339	1,338	1	1,250	1,234	16
Services	19,143	19,125	19	8,311	8,304	6	5,124	5,119	5	5,708	5,701	7
Misc. Organizations ⁴	632	630	2	374	374	-	51	51	-	207	205	2
Industry Not Reported	3	3	-	1	1	-	-	-	-	1	1	-

Plans with Fewer Than 100 Participants and Trusts ⁵

Industry	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total ¹	Single Employer ²	Multi-employer ³	Total ¹	Single Employer ²	Multi-employer ³	Total ¹	Single Employer ²	Multi-employer ³	Total ¹	Single Employer ²	Multi-employer ³
Total	81	75	6	70	67	3	5	4	1	6	4	2
Agriculture	1	1	-	1	1	-	*/	*/	-	-	-	-
Mining	1	1	*/	1	1	*/	*/	*/	-	*/	*/	-
Construction	16	15	2	15	13	1	1	1	*/	1	1	*/
Manufacturing	12	11	1	10	10	*/	*/	*/	*/	1	1	*/
Transportation	3	2	1	2	2	*/	*/	*/	*/	*/	*/	*/
Communications and Information	3	3	*/	2	2	-	*/	*/	-	*/	*/	*/
Utilities	3	3	*/	2	2	-	*/	*/	*/	*/	*/	-
Wholesale Trade	3	3	-	3	3	-	*/	*/	-	*/	*/	-
Retail Trade	5	5	-	5	5	-	*/	*/	-	*/	*/	-
Finance, Insurance, and Real Estate	10	9	1	8	7	1	1	1	*/	1	1	*/
Services	21	21	1	19	19	*/	1	1	*/	1	1	*/
Misc. Organizations ⁴	3	2	1	2	2	*/	*/	*/	*/	*/	*/	*/
Industry Not Reported	*/	*/	-	*/	*/	-	-	-	-	-	-	-

NOTES: Participants are tabulated as of the end of the plan year.

Totals may not equal the sum of the components due to rounding.

¹ For the purposes of this report, includes active, retired, and separated participants, either receiving benefits or entitled to future benefits.

² For the purposes of this report, includes single employer plans, plans of controlled groups of corporations, and multiple employer noncollectively bargained plans.

³ For the purposes of this report, includes multiemployer plans and multiple employer collectively bargained plans.

⁴ Religious, grantmaking, civic, professional, labor, and similar organizations. Does not include church plans which are not required to file.

⁵ For the purposes of this report, includes only plans with fewer than 100 participants as of the end of the plan year.

*/ Fewer than 500 participants.

- Missing or not applicable.

SOURCE: 2016 Form 5500 filings.

**Table B1. Number of Group Health Plans and Total Participants
by type of insurance and type of insurance contracts, 2016**

All Plans

Type of Insurance Contracts ¹	All Plans		Self-Insured		Mixed-Insured		Fully Insured	
	Number of Plans	Total Participants, End of Year (thousands) ²	Number of Plans	Total Participants, End of Year (thousands) ²	Number of Plans	Total Participants, End of Year (thousands) ²	Number of Plans	Total Participants, End of Year (thousands) ²
Total	56,211	75,164	23,704	34,493	4,098	27,505	28,409	13,167
No Insurance	7,489	8,486	7,489	8,486	-	-	-	-
Health Only	2,087	2,120	-	-	187	1,427	1,900	693
Stop-Loss Only	1,072	797	1,072	797	-	-	-	-
Other ³	10,318	19,254	10,318	19,254	-	-	-	-
Health and Stop-Loss	41	86	-	-	37	81	4	5
Health and Other ³	29,421	34,082	-	-	3,203	21,997	26,218	12,085
Stop-Loss and Other ³	4,825	5,956	4,825	5,956	-	-	-	-
Health, Stop-Loss, and Other ³	958	4,383	-	-	671	3,999	287	385

Plans with 100 or More Participants and Trusts

Type of Insurance Contracts ¹	All Plans		Self-Insured		Mixed-Insured		Fully Insured	
	Number of Plans	Total Participants, End of Year (thousands) ²	Number of Plans	Total Participants, End of Year (thousands) ²	Number of Plans	Total Participants, End of Year (thousands) ²	Number of Plans	Total Participants, End of Year (thousands) ²
Total	3,801	22,928	2,522	11,981	1,084	10,484	195	462
No Insurance	639	1,875	639	1,875	-	-	-	-
Health Only	95	1,023	-	-	84	1,019	11	4
Stop-Loss Only	332	473	332	473	-	-	-	-
Other ³	665	6,540	665	6,540	-	-	-	-
Health and Stop-Loss	26	62	-	-	26	62	-	-
Health and Other ³	871	7,495	-	-	700	7,098	171	397
Stop-Loss and Other ³	886	3,094	886	3,094	-	-	-	-
Health, Stop-Loss, and Other ³	287	2,367	-	-	274	2,306	13	61

(continued...)

**Table B1. Number of Group Health Plans and Total Participants
by type of insurance and type of insurance contracts, 2016**

Plans with 100 or More Participants and No Trusts

Type of Insurance Contracts ¹	All Plans		Self-Insured		Mixed-Insured		Fully Insured	
	Number of Plans	Total Participants, End of Year (thousands) ²	Number of Plans	Total Participants, End of Year (thousands) ²	Number of Plans	Total Participants, End of Year (thousands) ²	Number of Plans	Total Participants, End of Year (thousands) ²
Total	49,277	52,155	18,370	22,441	2,873	17,015	28,034	12,699
No Insurance	4,626	6,566	4,626	6,566	-	-	-	-
Health Only	1,914	1,095	-	-	64	407	1,850	688
Stop-Loss Only	511	315	511	315	-	-	-	-
Other ³	9,496	12,708	9,496	12,708	-	-	-	-
Health and Stop-Loss	14	24	-	-	10	20	4	5
Health and Other ³	28,312	26,578	-	-	2,406	14,895	25,906	11,683
Stop-Loss and Other ³	3,737	2,852	3,737	2,852	-	-	-	-
Health, Stop-Loss, and Other ³	667	2,016	-	-	393	1,693	274	324

Plans with Fewer Than 100 Participants and Trusts ⁴

Type of Insurance Contracts ¹	All Plans		Self-Insured		Mixed-Insured		Fully Insured	
	Number of Plans	Total Participants, End of Year (thousands) ²	Number of Plans	Total Participants, End of Year (thousands) ²	Number of Plans	Total Participants, End of Year (thousands) ²	Number of Plans	Total Participants, End of Year (thousands) ²
Total	3,133	81	2,812	70	141	5	180	6
No Insurance	2,224	45	2,224	45	-	-	-	-
Health Only	78	2	-	-	39	1	39	1
Stop-Loss Only	229	9	229	9	-	-	-	-
Other ³	157	6	157	6	-	-	-	-
Health and Stop-Loss	1	*/	-	-	1	*/	-	-
Health and Other ³	238	8	-	-	97	4	141	4
Stop-Loss and Other ³	202	11	202	11	-	-	-	-
Health, Stop-Loss, and Other ³	4	*/	-	-	4	*/	-	-

NOTES: Participants are tabulated as of the end of the plan year.

Totals may not equal the sum of the components due to rounding.

¹ Type of Insurance Contracts represents information reported on Schedule A. This information is reported as filed on Schedule A with the following exception. For fully insured and mixed-insured plans that do not attach a Schedule A for health insurance contracts, Schedule A is assumed to indicate one health insurance contract. The result is that fully insured and mixed-insured plans that would be listed under the categories of (a) No Insurance, (b) Stop-Loss, (c) Other, or (d) Stop-Loss and Other instead are listed under the categories of (e) Health, (f) Health and Stop-Loss, (g) Health and Other, and (h) Health, Stop-Loss, and Other.

² For the purposes of this report, includes active, retired, and separated participants either receiving benefits or entitled to future benefits.

³ Other insurance contracts include dental, vision, life, temporary disability, long-term disability, supplemental unemployment, and prescription drug.

⁴ For the purposes of this report, includes only plans with fewer than 100 participants as of the end of the plan year.

*/ Fewer than 500 participants.

- Missing or not applicable.

SOURCE: 2016 Form 5500 filings.

**Table B2. Distribution of Group Health Plans
by type of insurance, type of plan, and number of
health insurance contracts, 2016**

All Plans

Health Insurance Contracts ¹	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³
Total	56,211	54,471	1,740	23,704	22,672	1,032	4,098	3,546	552	28,409	28,253	156
None or Not Reported	23,704	22,672	1,032	23,704	22,672	1,032	-	-	-	-	-	-
1	21,320	20,901	419	-	-	-	2,436	2,105	331	18,884	18,796	88
2	6,993	6,835	158	-	-	-	759	643	116	6,234	6,192	42
3-5	3,554	3,452	102	-	-	-	646	564	82	2,908	2,888	20
6-10	490	464	26	-	-	-	187	165	22	303	299	4
11-25	124	122	2	-	-	-	57	56	1	67	66	1
26 or More	26	25	1	-	-	-	13	13	-	13	12	1

Plans with 100 or More Participants and Trusts

Health Insurance Contracts ¹	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³
Total	3,801	2,297	1,504	2,522	1,600	922	1,084	567	517	195	130	65
None or Not Reported	2,522	1,600	922	2,522	1,600	922	-	-	-	-	-	-
1	701	370	331	-	-	-	601	294	307	100	76	24
2	244	115	129	-	-	-	200	93	107	44	22	22
3-5	229	133	96	-	-	-	192	111	81	37	22	15
6-10	59	36	23	-	-	-	51	30	21	8	6	2
11-25	35	33	2	-	-	-	31	30	1	4	3	1
26 or More	11	10	1	-	-	-	9	9	-	2	1	1

(continued...)

**Table B2. Distribution of Group Health Plans
by type of insurance, type of plan, and number of
health insurance contracts, 2016**

Plans with 100 or More Participants and No Trusts

Health Insurance Contracts ¹	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³
Total	49,277	49,189	88	18,370	18,346	24	2,873	2,867	6	28,034	27,976	58
None or Not Reported	18,370	18,346	24	18,370	18,346	24	-	-	-	-	-	-
1	20,361	20,316	45	-	-	-	1,719	1,714	5	18,642	18,602	40
2	6,697	6,686	11	-	-	-	538	538	-	6,159	6,148	11
3-5	3,315	3,310	5	-	-	-	450	450	-	2,865	2,860	5
6-10	430	427	3	-	-	-	136	135	1	294	292	2
11-25	89	89	-	-	-	-	26	26	-	63	63	-
26 or More	15	15	-	-	-	-	4	4	-	11	11	-

Plans with Fewer Than 100 Participants and Trusts ⁴

Health Insurance Contracts ¹	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³
Total	3,133	2,985	148	2,812	2,726	86	141	112	29	180	147	33
None or Not Reported	2,812	2,726	86	2,812	2,726	86	-	-	-	-	-	-
1	258	215	43	-	-	-	116	97	19	142	118	24
2	52	34	18	-	-	-	21	12	9	31	22	9
3-5	10	9	1	-	-	-	4	3	1	6	6	-
6-10	1	1	-	-	-	-	-	-	-	1	1	-
11-25	-	-	-	-	-	-	-	-	-	-	-	-
26 or More	-	-	-	-	-	-	-	-	-	-	-	-

NOTES: Totals may not equal the sum of the components due to rounding.

¹ Number of Health Insurance Contracts represents information reported on Schedule A. The instructions provide that a plan should file a Schedule A for each insurance contract held by the plan. A plan may have more than one insurance contract. This information is reported as filed on Schedule A with the following exceptions. For fully insured and mixed-insured plans which do not attach a Schedule A for health insurance contracts, Schedule A is assumed to indicate one health insurance contract. The result is that for fully insured and mixed-insured plans for which there is no Schedule A record of a health insurance contract, one is added to the contract count of the given plan.

² For the purposes of this report, includes single employer plans, plans of controlled groups of corporations, and multiple employer noncollectively bargained plans.

³ For the purposes of this report, includes multiemployer plans and multiple employer collectively bargained plans.

⁴ For the purposes of this report, includes only plans with fewer than 100 participants as of the end of the plan year.

- Missing or not applicable.

SOURCE: 2016 Form 5500 filings.

Table B3. Distribution of Group Health Plan Participants
by type of insurance, type of plan, and number of health insurance contracts, 2016
(thousands)

All Plans

Health Insurance Contracts ¹	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total ²	Single Employer ³	Multi-employer ⁴	Total ²	Single Employer ³	Multi-employer ⁴	Total ²	Single Employer ³	Multi-employer ⁴	Total ²	Single Employer ³	Multi-employer ⁴
Total	75,164	69,314	5,849	34,493	31,224	3,269	27,505	25,116	2,389	13,167	12,975	192
None or Not Reported	34,493	31,224	3,269	34,493	31,224	3,269	-	-	-	-	-	-
1	13,919	12,901	1,018	-	-	-	6,974	6,001	974	6,945	6,900	45
2	6,164	5,870	294	-	-	-	3,602	3,345	257	2,562	2,525	37
3-5	8,329	7,336	993	-	-	-	6,187	5,272	915	2,142	2,064	79
6-10	5,255	5,014	241	-	-	-	4,572	4,338	234	683	677	6
11-25	5,448	5,439	9	-	-	-	4,929	4,921	9	519	518	1
26 or More	1,556	1,531	25	-	-	-	1,240	1,240	-	315	291	25

Plans with 100 or More Participants and Trusts

Health Insurance Contracts ¹	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total ²	Single Employer ³	Multi-employer ⁴	Total ²	Single Employer ³	Multi-employer ⁴	Total ²	Single Employer ³	Multi-employer ⁴	Total ²	Single Employer ³	Multi-employer ⁴
Total	22,928	17,193	5,735	11,981	8,732	3,249	10,484	8,141	2,343	462	320	143
None or Not Reported	11,981	8,732	3,249	11,981	8,732	3,249	-	-	-	-	-	-
1	1,925	943	982	-	-	-	1,829	875	954	96	68	28
2	1,018	743	275	-	-	-	900	643	257	118	99	18
3-5	2,196	1,216	980	-	-	-	2,053	1,138	915	143	78	66
6-10	1,075	860	215	-	-	-	1,026	817	209	49	43	6
11-25	3,566	3,557	9	-	-	-	3,548	3,540	9	18	18	1
26 or More	1,166	1,141	25	-	-	-	1,128	1,128	-	38	13	25

(continued...)

Table B3. Distribution of Group Health Plan Participants
by type of insurance, type of plan, and number of health insurance contracts, 2016
(thousands)

Plans with 100 or More Participants and No Trusts

Health Insurance Contracts ¹	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total ²	Single Employer ³	Multi-employer ⁴	Total ²	Single Employer ³	Multi-employer ⁴	Total ²	Single Employer ³	Multi-employer ⁴	Total ²	Single Employer ³	Multi-employer ⁴
Total	52,155	52,046	109	22,441	22,424	17	17,015	16,971	44	12,699	12,651	47
None or Not Reported	22,441	22,424	17	22,441	22,424	17	-	-	-	-	-	-
1	11,986	11,952	35	-	-	-	5,141	5,122	19	6,845	6,829	16
2	5,144	5,126	18	-	-	-	2,701	2,701	-	2,443	2,425	18
3-5	6,132	6,119	13	-	-	-	4,134	4,134	-	1,999	1,986	13
6-10	4,180	4,154	26	-	-	-	3,546	3,521	26	634	633	*/
11-25	1,881	1,881	-	-	-	-	1,381	1,381	-	501	501	-
26 or More	389	389	-	-	-	-	112	112	-	277	277	-

Plans with Fewer Than 100 Participants and Trusts ⁵

Health Insurance Contracts ¹	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total ²	Single Employer ³	Multi-employer ⁴	Total ²	Single Employer ³	Multi-employer ⁴	Total ²	Single Employer ³	Multi-employer ⁴	Total ²	Single Employer ³	Multi-employer ⁴
Total	81	75	6	70	67	3	5	4	1	6	4	2
None or Not Reported	70	67	3	70	67	3	-	-	-	-	-	-
1	8	6	2	-	-	-	4	4	1	4	3	1
2	2	1	1	-	-	-	1	1	*/	1	1	1
3-5	1	1	-	-	-	-	*/	*/	-	*/	*/	-
6-10	*/	*/	-	-	-	-	-	-	-	*/	*/	-
11-25	-	-	-	-	-	-	-	-	-	-	-	-
26 or More	-	-	-	-	-	-	-	-	-	-	-	-

NOTES: Participants are tabulated as of the end of the plan year.

Totals may not equal the sum of the components due to rounding.

¹ Number of Health Insurance Contracts represents information reported on Schedule A. The instructions provide that a plan should file a Schedule A for each insurance contract held by the plan. A plan may have more than one insurance contract. This information is reported as filed on Schedule A with the following exceptions. For fully insured and mixed-insured plans which do not attach a Schedule A for health insurance contracts, Schedule A is assumed to indicate one health insurance contract. The result is that for fully insured and mixed-insured plans for which there is no Schedule A record of a health insurance contract, one is added to the contract count of the given plan.

² For the purposes of this report, includes active, retired, and separated participants either receiving benefits or entitled to future benefits.

³ For the purposes of this report, includes single employer plans, plans of controlled groups of corporations, and multiple employer noncollectively bargained plans.

⁴ For the purposes of this report, includes multiemployer plans and multiple employer collectively bargained plans.

⁵ For the purposes of this report, includes only plans with fewer than 100 participants as of the end of the plan year.

*/ Fewer than 500 participants.

- Missing or not applicable.

SOURCE: 2016 Form 5500 filings.

Table B4. Premiums Paid by Group Health Plans
by type of insurance, type of plan, and type of insurance contracts, 2016
(millions)

All Plans

Type of Insurance Contracts ¹	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³
Total	\$164,337	\$154,410	\$9,927	\$19,259	\$18,438	\$821	\$42,857	\$34,544	\$8,312	\$102,221	\$101,428	\$794
Health Only	47,815	42,094	5,721	-	-	-	16,322	11,089	5,233	31,493	31,005	488
Stop-Loss Only	4,709	4,299	410	3,880	3,609	271	728	595	133	101	94	7
Other ⁴	37,933	36,236	1,697	13,642	13,146	496	16,043	14,912	1,131	8,248	8,178	70
Health and Stop-Loss	96	96	-	-	-	-	-	-	-	96	96	-
Health and Other ⁴	71,728	69,703	2,025	-	-	-	9,500	7,701	1,799	62,228	62,003	225
Stop-Loss and Other ⁴	2,013	1,942	70	1,737	1,682	55	263	248	15	12	12	-
Health, Stop-Loss, and Other ⁴	43	39	4	-	-	-	-	-	-	43	39	4

Plans with 100 or More Participants and Trusts

Type of Insurance Contracts ¹	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³
Total	\$28,965	\$19,402	\$9,563	\$3,385	\$2,598	\$787	\$22,864	\$14,624	\$8,240	\$2,716	\$2,180	\$536
Health Only	12,664	7,074	5,590	-	-	-	11,886	6,669	5,217	778	405	373
Stop-Loss Only	1,049	643	405	826	560	266	215	82	133	7	**/	7
Other ⁴	7,774	6,150	1,624	2,072	1,593	480	5,554	4,455	1,100	147	102	45
Health and Stop-Loss	-	-	-	-	-	-	-	-	-	-	-	-
Health and Other ⁴	6,888	5,006	1,883	-	-	-	5,108	3,333	1,775	1,780	1,673	107
Stop-Loss and Other ⁴	587	530	57	487	445	42	101	85	15	-	-	-
Health, Stop-Loss, and Other ⁴	4	-	4	-	-	-	-	-	-	4	-	4

(continued...)

Table B4. Premiums Paid by Group Health Plans
by type of insurance, type of plan, and type of insurance contracts, 2016
(millions)

Plans with 100 or More Participants and No Trusts

Type of Insurance Contracts ¹	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³
Total	\$135,109	\$134,810	\$300	\$15,773	\$15,748	\$25	\$19,886	\$19,848	\$37	\$99,451	\$99,213	\$238
Health Only	35,070	34,962	107	-	-	-	4,383	4,382	1	30,687	30,581	106
Stop-Loss Only	3,620	3,618	2	3,013	3,011	2	513	513	-	94	94	**/
Other ⁴	30,109	30,043	66	11,534	11,524	10	10,475	10,445	31	8,099	8,075	24
Health and Stop-Loss	96	96	-	-	-	-	-	-	-	96	96	-
Health and Other ⁴	64,775	64,663	112	-	-	-	4,352	4,346	5	60,423	60,317	107
Stop-Loss and Other ⁴	1,401	1,388	13	1,226	1,213	13	163	163	-	12	12	-
Health, Stop-Loss, and Other ⁴	39	39	-	-	-	-	-	-	-	39	39	-

Plans with Fewer Than 100 Participants and Trusts ⁵

Type of Insurance Contracts ¹	All Plans			Self-Insured			Mixed-Insured			Fully Insured		
	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³	Total	Single Employer ²	Multi-employer ³
Total	\$262	\$198	\$64	\$101	\$92	\$9	\$107	\$72	\$35	\$55	\$35	\$20
Health Only	82	58	24	-	-	-	53	38	16	28	20	8
Stop-Loss Only	41	38	3	41	37	3	**/	**/	-	-	-	-
Other ⁴	51	44	7	36	30	6	13	12	1	2	2	1
Health and Stop-Loss	-	-	-	-	-	-	-	-	-	-	-	-
Health and Other ⁴	64	35	30	-	-	-	40	21	19	24	13	11
Stop-Loss and Other ⁴	25	25	-	25	25	-	-	-	-	-	-	-
Health, Stop-Loss, and Other ⁴	-	-	-	-	-	-	-	-	-	-	-	-

NOTES: The premium reported for each plan is equal to the maximum of the following Schedule A values: (1) earned premium on line 9a(4) of Part III, (2) the total premiums or subscription charges paid to carrier on line 10a of Part III, (3) the total amount of commissions paid to agents, brokers, and other persons on line 2a of Part I, (4) the total amount of fees paid to agents, brokers, and other persons on line 2b of Part I, (5) the premiums paid to carrier on line 6b of Part II, (6) the incurred claims on line 9b(3) of Part III, (7) or the claims charged on line 9b(4) of Part III. These values are reported as filed with no adjustment.

Totals may not equal the sum of the components due to rounding.

¹ Premiums paid by Type of Insurance Contracts is reported as found on Schedule A without adjustment. As a result, for fully insured and mixed-insured plans for which there are no Schedule A insurance contracts, no premium information is recorded.

² For the purposes of this report, includes single employer plans, plans of controlled groups of corporations, and multiple employer noncollectively bargained plans.

³ For the purposes of this report, includes multiemployer plans, and multiple employer collectively bargained plans.

⁴ Other insurance contracts include dental, vision, life, temporary disability, long-term disability, supplemental unemployment, and prescription drug.

⁵ For the purposes of this report, includes only plans with fewer than 100 participants as of the end of the plan year.

**/ Less than \$500,000.

- Missing or not applicable.

SOURCE: 2016 Form 5500 filings.

APPENDIX A1: Plan Funding Classification

The majority of the U.S. population receives their health insurance coverage through their employer. In 2016, employer-sponsored health insurance covered 56 percent of the U.S. population.¹ There are a variety of ways in which plan sponsors (usually employers) may fund the health insurance coverage they offer their workers.²

What Is a Self-Insured Group Health Plan?

Sponsors may purchase a group insurance policy from a state-licensed insurance carrier or similar organization and pay premiums directly to the insurer. Plans may set aside assets in a dedicated trust to fund the health plan, an arrangement known as a “funded” arrangement for Form 5500 reporting purposes. Alternatively, plan sponsors may pay the plan’s benefits directly out of their general assets, an arrangement known as “unfunded” for Form 5500 reporting purposes. In addition, these funding arrangements – insured, funded, and unfunded – may be combined in multiple ways. For example, a group insurance policy may cover a subset of the plan’s health benefits, but the plan’s remaining health benefits may be paid out of the plan sponsor’s general assets. Plans may use assets held in a dedicated trust to pay insurance premiums or to pay plan benefits directly. Whether a plan is considered to be self-insured, fully insured, or a mixture of

both is a function of how the benefits are provided under the plan.

Fully insured – A fully insured plan provides health benefits by purchasing a group health insurance policy or contract from a state-licensed insurance carrier or similar organization, such as Blue Cross Blue Shield or a health maintenance organization. The insurance carrier then assumes financial responsibility for the covered health benefit claims of the plan’s participants and associated administrative costs.³ An employer with a fully insured health plan chooses how to transfer insurance premiums⁴ to the insurance carrier. The plan either establishes a trust for the express purpose of receiving contributions for the payment of insurance premiums or pays the premiums directly from the plan sponsor’s general assets.

Self-insured – In the case of a self-insured health plan, the sponsor generally assumes the financial risks associated with covering the health benefit expenses of the plan’s participants. Benefits in a self-insured plan may be paid, as needed, directly from the general assets of the sponsoring employer or paid from a trust⁵ to which employer and/or employee contributions have been made. While some self-insured plans are self-administered, employers usually enter into a contract with a third party administrator (TPA) or use another outside entity to handle enrollment, pay claims, collect premiums, provide customer service, and perform other administrative duties.

¹ U.S. Department of Labor, Employee Benefits Security Administration calculations using the March 2017 Current Population Survey Annual Social and Economic Supplement.

² Upon establishment of a welfare plan, the plan sponsor decides how the plan will be structured – including how the plan benefits will be paid.

³ Definitions of Health Insurance Terms, at <http://www.bls.gov/ncs/ebs/sp/healthterms.pdf>.

⁴ The premium payments could be paid entirely by the employer, entirely by employee contributions, or partly from the employer and partly from employee contributions.

⁵ Some employers may invest plan assets in a separate insurance company account instead of holding plan assets and investing through a trust.

The financial risk for self-insured benefit claims may be borne partially or entirely by the employer offering the self-insured plan. To protect against unexpectedly large claims, self-insured plans or employers sponsoring such plans may obtain stop-loss insurance coverage. Stop-loss coverage limits the liability (stops the loss) the plan or employer bears for each covered person's health care costs (in the case of policies with individual or specific attachment points) or for the total expenses of the plan (aggregate attachment points), as the stop-loss carrier will reimburse the plan or employer for losses above the policies' attachment points.⁶

Mixed-insured – A mixed-insured plan contains both fully insured and self-insured components. For example, an employer may offer its employees a choice between a fully insured HMO option and a self-insured PPO option. If both plan components were reported on a single Form 5500 filing, the plan would be considered mixed-insured.

Form 5500 Health Plan Filing Requirements

The Employee Retirement Income Security Act of 1974, as amended ("ERISA"), and the Internal Revenue Code of 1986, as amended ("Code"), establish certain reporting and filing obligations for private sector employee benefit plans. Plans generally are required to file an annual return/report

⁶ An employer may also purchase a "minimum premium" arrangement in which the employer pays a fraction of the fully insured premium to cover non-claim expenses, such as administration and claims processing, and pays claims up to an agreed-upon limit, after which the insurance carrier is responsible. Under a minimum premium arrangement, the insurance carrier usually is also responsible for processing claims and administrative services.
⁷ See ERISA Section 101, 29 U.S.C. 1021 and accompanying regulations. The data used for this report were taken from the Form 5500 data for plan years 2016 and earlier. For plan years beginning on or after January 1, 2009, certain eligible small plans are able to file the Form 5500-SF "Short

concerning, among other things, the financial condition and operations of the plan.

In 1975, the Department of Labor (the "Department"), the Internal Revenue Service, and the Pension Benefit Guaranty Corporation (collectively, the "Agencies") jointly developed the Form 5500 Series to allow employers who sponsor an employee benefit plan for their employees to satisfy the annual reporting requirements under Title I and Title IV of ERISA and under the Code. The Agencies have changed the Form 5500 over time. Today, filing the Form 5500 together with any required Schedules and Attachments (the "Form 5500") generally satisfies these annual reporting requirements.⁷

The Form 5500 is an important source of information on ERISA-covered, private sector employer-sponsored benefit plans and their operation, funding, assets, and investments. The majority of Form 5500 reports are filed for employee pension benefit plans. Welfare benefit plans (which include plans providing benefits such as medical, dental, life insurance, severance pay, disability, etc.) are required to file a Form 5500, with certain exceptions tied to plans' size, funding arrangement, and sector. These exceptions are listed below:⁸

- Welfare plans (other than plans required to file the Form M-1) with fewer than 100 participants as of the beginning of the plan year that are unfunded, fully insured, or a combination of insured and unfunded⁹

Form Annual Return/Report of Small Employee Benefit Plan." Small plans using the Form 5500-SF include information about total fees and commissions paid with respect to the purchase of insurance.

⁸ 29 C.F.R. 2520.104-1.

⁹ An unfunded welfare benefit plan has its benefits paid as needed directly from the general assets of the employer or employee organization that sponsors the plan. A combination unfunded/insured welfare benefit plan has its benefits partially as an unfunded plan and partially as a fully insured plan. An example of such a plan is a welfare benefit plan that provides unfunded medical benefits and life insurance benefits.

- Welfare plans maintained outside the United States that serve mostly nonresident aliens
- Governmental plans
- Unfunded or insured welfare plans maintained for a select group of management or highly compensated employees only
- Plans maintained only to comply with workers' compensation, unemployment compensation, or disability insurance laws
- Welfare benefit plans that participate in a group insurance arrangement that files a Form 5500 on behalf of the participating plans
- Apprenticeship or training plans meeting certain conditions
- Certain unfunded welfare benefit plans financed by dues
- Church plans
- Welfare benefit plans maintained solely for only the owner and/or spouse who wholly own a trade or business or the partners and/or spouses of partners in a partnership

A small plan that receives employee (or former employee) contributions during the plan year and does not use the contributions to pay insurance premiums or uses a trust or separately maintained fund to hold plan assets or act as a conduit for the transfer of plan assets during the year is required to file. An exception to this rule is a small plan associated with a cafeteria plan under Internal Revenue Code section 125 with employee contributions that are used to pay benefits instead of insurance premiums. This type of plan may be treated for annual reporting purposes as an unfunded welfare plan if it meets certain Department requirements.

Data Used for this Report

The data included in this report consists of all Form 5500s filed by welfare plans providing health benefits that had plan year ending dates in 2016. Certain filings are excluded in order to reflect the filing requirements described above:

- Plans filing the Form 5500 with fewer than 100 participants as of the beginning of the plan year that filed without a Schedule H or I or with a Schedule H or I that have zero or blank values for each of total assets, liabilities, net assets, income, and expenses;
- Plans that filed the Form 5500-SF with fewer than 100 participants as of the beginning of the plan year that have zero or blank values for each of total assets, liabilities, net assets, income, and expenses;
- Direct Filing Entities; and
- Duplicate filings.

For purposes of this report, Form 5500 health plans are categorized as being self-insured, fully insured, or a mix of both self-insured and fully insured (mixed-insured). The Department used information from the 2016 Form 5500 on plans' funding arrangements, together with information from Schedule A "Insurance Information," Schedule H "Financial Information," and Schedule I "Financial Information - Small Plan" to categorize the plans as follows:

- (1) Self-insured. The plan does not include information on a health insurance policy or contract in any Schedule A filed as part of the Form 5500. For classification purposes, Schedule A insurance contracts are not considered health insurance policies or contracts if the per capita premium amount reported is less than \$2,000 or the filing also

indicates that the policy could be for stop-loss coverage or for payments to a TPA.¹⁰ The filing must also either:

- (a) indicate the plan is funded through a trust or general assets of the sponsor;
 - (b) include a Schedule H or Schedule I and report benefit payments;
 - (c) be filed on the Form 5500-SF and report nonzero total assets, liabilities, or net assets; or
 - (d) be filed on the Form 5500-SF with fewer than 100 participants as of the beginning of the plan year and report zero total assets, liabilities, and net assets with a nonzero amount for income or expenses.
- (2) Mixed-insured. The plan does not meet the requirements in (1) and either:
- (a) the number of individuals covered under insurance contracts as reported on the Schedule A is less than half of the total number of participants as of the end of the plan year, and the filing indicates that the plan is funded through a trust or general assets of the sponsor; or
 - (b) the filing has an attached Schedule H that indicates benefit payments directly to participants or beneficiaries; or
 - (c) the filing has an attached Schedule H that indicates benefit payments but *does not* indicate benefit payments directly to participants or beneficiaries *and both*
 - i) Premiums paid for all insurance contracts as reported on the Schedule A are *not* within 10% of total payments to insurance carriers for the provision of benefits as reported on Schedule H, and

- ii) Premiums paid for all *health* insurance contracts as reported on the Schedule A are *not* within 10% of total payments to insurance carriers for the provision of benefits as reported on Schedule H; or
- (d) the filing has an attached Schedule I that indicates benefit payments *and both*
- i) Premiums paid for all insurance contracts as reported on the Schedule A are *not* within 10% of total benefits paid as reported on Schedule I and
 - ii) Premiums paid for all *health* insurance contracts as reported on the Schedule A are *not* within 10% of total benefits paid as reported on Schedule I.

- (3) Fully insured. The plan does not meet the criteria in (1) or (2).

For purposes of this report, private sector employer-sponsored health plans were also divided into six distinct categories based on the Form 5500 filing requirements.

1. Small plans (covering fewer than 100 participants as of the end of the year) that fully insure their health plan
2. Small plans that self-insure but do not have a trust
3. Small plans that self-insure their health plan and use a trust to hold the plan assets
4. Large plans (covering 100 or more participants as of the end of the year) that fully insure health plans
5. Large plans that self-insure and use a trust to hold the plan assets
6. Large plans that self-insure but do not operate a trust

Generally, small group health plans that fully insure benefits or self-insure benefits but do not have a trust are not required to

¹⁰ Although Schedule A health insurance contracts reporting a per capita premium of less than \$2,000 are not considered as such to determine the plan funding classification, they are ultimately counted as health insurance contracts in the event that the plan is deemed fully insured.

file a Form 5500.¹¹ All large welfare plans that fully insure or self-insure benefits without a trust must file, but are only required to file the main Form 5500 and the Schedule A to report information about insurance contracts.

The tables in this document summarize Form 5500 data for health plans that file. In a limited number of cases, the filed information has been edited to better reflect the universe of Form 5500 filing health plans. For example, certain plans that did not indicate an intention to terminate submitted filings that reported zero participants as of the end of the plan year but a positive number of participants at the beginning of the year. In these cases, the beginning of year participation count has been used for the end of year count and all of these participants have been classified as active participants.

The statistics reported within this document also contain one important imputation. Namely, any plans deemed to be mixed-insured or fully insured as defined previously are assumed to have at least one health insurance contract even when a Schedule A has not been appropriately filed to provide details on insurance contracts purchased by the plan. Otherwise, all figures reported herein are tabulated without adjustment.

¹¹ Large plans that use a trust to hold the plan assets to self-insure health benefits are required to file a comprehensive Form 5500, including a Schedule H to report financial information about the plan's operations. Generally, those small plans that use a trust to self-insure their health benefits are not required to file a Schedule H. These filings include more abbreviated financial information about the plan's operation as filed on Schedule I or the Form 5500-SF.